

FACTS IN EVIDENCE
OF THE
TRUTH OF HOMŒOPATHY;

BEING
AN ACCOUNT OF FIFTY CASES
SUCCESSFULLY TREATED ON THAT PRINCIPLE:
WITH REMARKS.

BY
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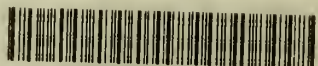
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P R E F A C E.

IN the present state of feeling and opinion on the subject of homœopathy prevalent in the medical profession, expressed in their journals, and consequently adopted by a considerable portion of the thinking public, it appears incumbent on a medical man who openly adopts the obnoxious doctrine, if he have any regard for his character for honesty on the one hand, or for good sense on the other, publicly to state his reasons for the course which he has taken. This is the explanation of my primary object in appearing in print, although in defending myself I have necessarily contributed my quota (small though it may be) to the defence of the therapeutic doctrine which I have embraced. My purpose has been, as much as possible, to act only on the defensive, and any remarks which I may have made, appearing to have an opposite tendency, have not been prompted by any unkind feeling towards my medical brethren, but simply by the necessity of clearing the ground in order to make good my position.

The reason I have given for writing at all will be a sufficient explanation to any candid medical man, for my having written in a style to be intelligible to the more intelligent portion of the reading public. I have always had a great dislike to the not uncommon practice on the

part of medical authors, of writing rather for the public than the profession ; but in the case of one for the first time openly taking a position with the (to judge from the language of the medical journals and of many medical men in private) contemned and abhorred homœopathic medical body, such a course appears unavoidable, unless he would be willing to lose both his character and practice.

209, BATH BUILDINGS, GLOSSOP ROAD,
SHEFFIELD; *April 28th*, 1859.

FACTS IN EVIDENCE OF THE TRUTH OF HOMŒOPATHY.

“Man is but the servant and interpreter of Nature.”—*Lord Bacon.*

UNTIL a comparatively recent period, I, in common with the greater part of the medical profession, believed homœopathy to be a delusion. I indeed once entertained the idea that no educated medical man could honestly practise it: more recently, however, having become acquainted with homœopathic practitioners whose sincerity I could not doubt, I was willing to admit that, though deluded, they were unconsciously so. I may add, however, that I never approved of the virulent and vulgar abuse heaped upon homœopathists by the weekly medical journals: being convinced that a more temperate exposure of the error would be much more effective; and that calling names, being the mere expression of angry passion, is much more likely to be employed against truth than against error. Little did I think, however, then, how strict an exemplification of this fact the case referred to afforded; although I resigned my membership in the Provincial Medical Association some seven or eight years ago (when I think Dr. M'Cormack was editor of the journal,) chiefly for this reason.

I may here pause for a moment to inquire, what is the

reason that medical men have such strong prejudices against homœopathy. I believe, if I refer to my own experience in the matter, it will represent that of a numerous class :

1st. I never fairly took into consideration the principle "similia similibus curentur," of which I might have found many confirmations in ordinary practice.

2d. I allowed my mind to dwell exclusively on the apparent absurdity of the small dose.

3d. I did not read the writings of homœopathists, and, above all, made no experiments on the subject ; I did not feel bound to take the trouble of investigating what appeared so transparent a delusion, although often urged to do so by friends who were favorable to it.

4th. I was disgusted by the proceedings of certain homœopathists, and did not then, any more than I do now, approve of persons setting up for medical practitioners, without any knowledge of the healthy structure and functions of the body, whose morbid states they essayed to correct.¹

I can therefore make no claim in the matter to a candour greater than that of other medical men. And this leads me to mention what was the cause of my change of sentiment. I feel persuaded that (humanly speaking) I never should have made the trial, which has issued in conviction of the truth of homœopathy, if a medical friend had not pertinaciously though kindly urged me to do so, and removed any excuse which I might have been inclined to make for the refusal to accede to his request, by presenting me with some homœopathic medicines and books. If this had not been done, I am persuaded I should not have thought it worth while either to lay out money, or to risk my credit with my medical friends, by being seen at the shop of a homœopathic chemist.

The first case that I saw which made an impression on my mind favorable to homœopathy, was treated by the

¹ I think no reasonable person can offer an objection to the domestic practice of homœopathy in the little ailments of children. Even those who have no faith in its efficacy surely cannot but acknowledge that the harmless globule is an excellent substitute for the maternal rhubarb mixture or black draught, or even calomel powder of the old *régime*.

medical friend already referred to. It was that of a poor girl in an advanced stage of consumption, in which a dose of homœopathie medicine, which appeared to me ridiculously small, checked the diarrhœa that is so frequent an accompaniment of that terrible disease, more completely than any of the astringent medicines she had previously taken; and this occurred several times on a recurrence of the affection.

Having thus got a proof that satisfied me homœopathy was not "all humbug" (I quote the *elegant* language of the medical journals), I was encouraged to try the effect of homœopathic medicine in a case that occurred shortly afterwards. It was that of an infant suffering from obstinate, and as I feared incurable, diarrhœa, in which the most powerful astringents had produced little effect upon the disease. Here, again, I found homœopathic medicine far more successful than anything I either previously or subsequently gave; but it did not entirely remove the affection, and finding the mother of the child was getting impatient under the use of tasteless medicines in so serious a complaint, and foreseeing also the probability of a fatal issue, I did not continue the administration of homœopathie remedies. The child died some weeks afterwards, though I think it probable that if I had had my present knowledge of homœopathie remedies, and the confidence of the parents in their use, the child might, humanly speaking, have been cured.

A day or two after the last-mentioned case, I attended a case of fever, which recovered with extraordinary rapidity under the use of the Tincture of Aconite; the mother of the patient (a young girl) stating that an immediate change had taken place after commencing the use of the medicine. She was not told, however, that it was homœopathic medicine, nor led to expect any extraordinary result from its use. And here I would take the opportunity of observing, that until the time of my declaration that I had become a homœopathist, I disguised the medicine, and neither, in any instance, acquainted the patient with the fact of its being homœopathie medicine, nor that there was any parti-

cular virtue in it. Also, in very few instances did I give even ordinary directions about diet, or adopt collateral treatment. I acted in this way, not because I consider such matters of little importance, but in order more fully to test the power of homœopathic medicines.

At the period at which I have now arrived the outworks of the citadel of prejudice, in which I had been entrenched against the aggressive influence of homœopathic truth, may be said to have been carried; but a case now occurred by means of which an irreparable breach was made in the fortress itself.

CASE I.—On *July 5th*, 1858, I was requested to see *Mrs. W—*, a lady aged about 30, about seven months advanced in her first pregnancy. On visiting her I felt at once that the symptoms were so definite, and so closely resembling those produced by a poison (which has unhappily of late become well known to the public), the symptoms occasioned by which are both so remarkable, clearly defined, and uniform, that I felt the case would, as far as it was possible for an individual case to do so, afford an *experimentum crucis* as to the truth or falsehood of the principle “*similia similibus curentur*.” The case was one which would be known by medical men as partial idiopathic tetanus, or fixed spasmodic muscular contraction. The patient had been, for at least twenty-four hours before I visited her, suffering from the following symptoms:—The muscles of the fingers and thumbs of both hands were firmly and painfully contracted, the thumbs and fingers being strongly pressed against the palms, so that she was unable to open her hands, and the attempt to separate them, on the part of another person, caused severe pain. She had also cramps in the calves of the legs. Now these symptoms bearing a very close resemblance to some of those produced by *Nux vomica*, or its active principle *Strychnia*, I at once concluded that if this substance did not produce any effect upon the case, it would afford a strong presumption against homœopathy; but that if it did, it would go a long way in corroboration of its truth. I therefore felt some solicitude about the result, and am not ashamed to say, as a Christian, that I prayed that the result might be so clear as to be a material aid in arriving at a conclusion one way or the other. I visited my patient on the next day, and never ascended a flight of stairs with much more anxiety than I did on the present occasion. I found, not only that my patient was relieved of the painful affection for which I had been consulted, but also that, from the period and completeness of the cure, there could have been no doubt in the mind of any candid medical observer that the cure was due to the medicine she had taken—that whatever wonders nature sometimes works in the cure of disease, on the present occasion it was art, and not nature, that had been the physician. *Mrs. W—* informed me that, after the first dose of the medicine, the painful pressure on the palms of the hands had ceased; and that after the second, which was taken a quarter of an hour after the first, she was able to open her hands. She had no return either of the spasms of the muscles of the fingers or legs. I am not aware that even now she knows that she was treated on this occasion on a principle different from that which had guided my former practice in her illnesses.

I would not attach undue importance to a single case ; but I consider this case as of great importance for several reasons.

1. It is one of great rarity, but yet remarkably definite in its symptoms.

2. Because the homœopathic remedy, when taken in a poisonous dose, is equally remarkable and definite in its results.

3. Because the cure was so rapid and complete, as to leave no reasonable doubt as to its having been produced by the medicine, there being, (comparing the time which the affection had existed previously with the period which elapsed between the medicine being taken and the removal of the symptoms,) at least a hundred chances to one against its spontaneous occurrence just then.

4. Because I was guided to the choice of the remedy, which proved so successful, not by experience—for I had never seen a precisely similar case ; not by the experience of others—for I did not consult any work in reference to the matter, either homœopathic or allopathic ; not by pathological reasoning on ordinary principles—for this would never have led me to give a spinal stimulant in a case of spinal irritation ;—but simply by the homœopathic law.

I have since frequently prescribed in various cases on the same principle, (and with similar success,) *i. e.*, merely from my knowledge of the symptoms produced by poisonous doses of the substances prescribed. And this leads me to observe that I believe a practitioner, for the first time beginning to prescribe according to the homœopathic law, might attain a *tolerable* measure of success, even though he had no access to homœopathic works, provided he had an accurate acquaintance with the *Materia Medica* and *Toxicology* of the old school,—a measure of success much greater, I am persuaded, than would attend the practice of the most accomplished and experienced physician, not acting under the guidance of this natural law of cure. As an illustration of my meaning, we may conclude that a pilot, at an era prior to the general use of the mariner's compass, would, when out of sight of land, if in possession of this instrument, have

a great advantage over a mariner of much greater experience, but who lacked the guide to navigation which he possessed,—a guide acting according to a principle real and undoubted, though not understood. So in the case before us, a medical practitioner in possession of nature's law of cure, will have, especially in a case like the one before us, where the landmarks of experience are out of sight, an immense advantage over a physician in other respects his superior, but who rejects the guide which is offered to him because it does not accord with his previous notions.

Whilst on this subject I would remark, that we have a splendid illustration of the *à priori* mode of reasoning in the fact, that before Hahnemann had seen a single case of cholera, merely judging from the descriptions of observers at a distance, he dictated the treatment which has since proved far more successful than that of the old school.¹

Since the case which I have described, I have treated several hundred patients homœopathically, in some with results equally striking with those detailed above, and in a very large proportion with a degree of success much greater than has ever before attended my practice. I regret that, although I have for several years been in the habit of keeping an account of all my interesting cases, the notes

¹ The remarkable comparative success which has attended the homœopathic practice in cholera has at length attracted the attention of medical men of the old school; hence we find a Dr. Black, in a communication addressed to the 'Lancet,' and which has been esteemed of sufficient importance to be quoted at length in 'Braithwaite's Half-yearly Retrospect of Medicine and Surgery' (*vide* vol. xxxvii, p. 346), speaks in very strong terms of the value of Arsenic as a "specific" in cholera, and states that it has been, without collateral treatment, successful in his hands in nearly two hundred cases. He does not acknowledge the source from whence he has borrowed his treatment, but seems to wish his readers to suppose that it is original; and a similar appropriation of homœopathic remedies is becoming not uncommon, and is contemporaneous with, and indeed found in, the same journals as the abuse and misrepresentation of the system from which those very remedies are filched, and but for which, for the sake of suffering humanity, homœopathists would only be too happy to find their medicines adopted. Thus, to go no further back, which it would not be difficult to do, my edition of Jahr's 'Symptomen Codex' was published in 1848, nine years before the publication of Dr. Black's paper; and at page 167, under the head "Arsenicum," I find the following:—"Cholera Asiatica in every stage, particularly in the first, until the end of the second stage."

taken at the time, in regard to some of the following, are much more meagre than they would have been, had I at the time had any idea of publishing them.

SCARLATINA AND SORE THROAT.

CASE II.—*August 1st.*—*Mrs. L—'s son, æt. 6.*

I found, on visiting the patient, that he was, as I considered at the time, almost hopelessly ill of scarlet fever, with sore throat; eruption dark and much developed; burning skin: very rapid pulse (142 per minute); delirium, with occasional convulsions.

Tinct. Aconite and Belladonna in alternation.

2d.—Less fever; pulse 130; but a good deal of twitching of the muscles of the extremities (*subsultus tendinum*).

Omit the Aconite. Continue Tinct. Belladonna in alternation with Tinct.

Nux vomica.

3d.—Considerable diminution of all the symptoms.

5th.—Symptoms of fever, head and throat affection gone. Convalescent, with the exception of aphthæ on mucous membrane of mouth.

Continue Tinct. Belladonna; lotion, Tinct. Lyttæ.

11th.—Cured.

I do not remember ever to have seen so rapid a recovery from so severe a case of scarlatina.

PUERPERAL FEVER—RAPID RECOVERY.

CASE III.—*August 9th.*—*Mary B—.*

She was confined on the 30th ult., and recovered well, but took cold on the 7th inst. (Saturday). I was sent for late on the Monday evening, and found her, at 10 p.m., suffering from symptoms of a severe attack of puerperal fever; burning dry skin; flushed face; pulse 125; anxious countenance; lochia suppressed; pain "from head to foot;" breasts painful.

St. Tinct. Aconite (1), gt. j o. $\frac{1}{2}$ hora.

10th.—All the symptoms greatly mitigated; there had been no local treatment except drawing one breast.

12th.—Further improvement.

14th.—Convalescent.

I may make the same remark in this case as in the case of scarlatina above narrated, viz., that I do not remember ever to have witnessed an equally rapid recovery from fever occurring under such circumstances.

ACUTE INFLAMMATION OF THE BOWELS, WITH DIARRHŒA, CURED BY AN INTESTINAL IRRITANT.

CASE IV.—*Arthur S—, æt. 16.*

August 14th, 9 p.m.—Two or three days ago, went for the day into the country with a Sunday-school pleasure party (the day was showery), and whilst from home bought a "quartern" of plums and ate most of them.

Was seized yesterday morning with cramps in the abdomen, excessive vomiting and diarrhœa, and feverish symptoms, which have gone on increasing ever since. Now pain and tenderness in abdomen, increased at intervals; tympanitic distension of bowels; frequent vomiting, with diarrhœa; rapid pulse; burning, dry skin and dry tongue; flushed, anxious countenance; and other symptoms of fever.

Tinct. Merc. Bichlor. (1), gt. j o. hora, in alternation with Aconite.

15th.—All the morbid symptoms greatly mitigated; tympanitis and abdominal tenderness gone; no return of vomiting and purging for several hours; feverish symptoms much lessened.

16th.—Convalescent; although, in a day or two afterwards, I was called in to attend him for a chest affection, which had probably been occasioned by exposure to wet on the day of the excursion; of which, however, he was soon cured by homœopathic treatment.

I consider this very rapid recovery not less remarkable, nor less distinctly attributable to the medicines, than the first case which I have detailed, since a spontaneous recovery so rapid and complete is certainly not in accordance with the natural history of the disease. Thus, on referring to Dr. Copland's 'Dictionary of Medicine,' I find that he states that the average duration of the disease is thirteen or fourteen days (vol. ii, p. 570, under head of "Inflammation of Small Intestines"), but the unaided cessation of all the acute symptoms, especially when induced as above, in four-and-twenty hours, is a position which even the most sceptical would, I think, scarcely contend for. I was guided in the choice of the remedies, as in the case of tetanus above related, not by a reference to authorities, but by an application of the homœopathic law.

The principal symptoms of poisoning by bichloride of mercury (see Taylor and Christison on 'Poisons,' Pereira's 'Materia Medica,' &c.) are, pain and tenderness in the abdomen; nausea, vomiting, and diarrhœa; flushed countenance, rapid pulse, &c. Hence the remedy was strictly homœopathic to the case.¹ Most of the above-mentioned symptoms also are produced by a poisonous dose of Aconite, as described in the works above referred to; the provings of homœopaths have also demonstrated that it induces, in comparatively large, though not absolutely

¹ By this expression it is to be understood that the symptoms produced by the medicine, when taken in large doses, closely resemble those of the disease.

poisonous, doses, burning skin, flushed face, rigors, quick and hard pulse, and other feverish symptoms. Thus the two remedies given in the above case covered all the symptoms, and the rapid recovery was easily accounted for on the principle "*similia similibus curentur*."

DYSENTERY—CRAMPS—COLLAPSE—RAPID CURE.

CASE V.—*Catherine J—, æt. 54.—August 16th.*—Frequent motions of blood and slime; vomiting; cramp in calves of legs; feeble pulse; cold extremities.

Has been half starved for some time, her husband having been out of work.

Tinct. Merc. Bichlor. (1), Nux vomica (1), alternately every half hour.

17th.—Symptoms much relieved; vomiting and discharge from bowels almost ceased; cramp less frequent and severe.

This woman quickly and completely recovered from the symptoms of intestinal irritation, though she did not recover her strength for two or three weeks, which was not surprising under the circumstances.

SEVERE DIARRHŒA AND VOMITING, WITH COLLAPSE—VERY RAPID CURE
BY ARSENICUM.

CASE VI.—*Mrs. W—, æt. about 40.—Wednesday, August 18th.*—Was called up early and hastily this morning to attend this lady. I found that, since Saturday last, she has been suffering from purging and vomiting, brought on, she thinks, by over-exertion in connexion with a change of residence. Has been taking a variety of nostrums—brandy and laudanum, tincture of rhubarb, also medicine procured from the shop of a neighbouring druggist—without relief. Thought she was a little better yesterday, but last night was worse than ever.

7 a.m.—Diarrhœa; vomiting; abdominal spasms; feeble pulse; pale and exhausted, although, when well, she is of remarkably healthy and robust appearance.

St. Tinct. Arsenic. (1), gt. j o. $\frac{1}{2}$ hora.

8 p.m.—Symptoms were renewed after I left (before the medicine was taken) with great violence. No return of the symptoms after the use of the medicine was commenced.

19th.—All the symptoms completely relieved. No return of the vomiting or purging since she began the use of the Arsenicum. Has, however, been much weakened by the attack.

21st.—Discharged cured.

In all works on toxicology, the leading symptoms of poisoning by arsenic are described to be vomiting and purging, with depression of the vital powers; also severe abdominal pain; so that, if these symptoms were present

soon after taking food or drink, and there were any suspicion of poisoning, a toxicologist would be very likely to suspect that arsenic had been the poison used. Hence we see how the rapid recovery of the patient is accounted for according to the law of similars. The vomiting and purging had come on spontaneously, or had been excited by other causes than arsenic, and were therefore curable by a remedy which, in larger doses, would have produced those symptoms in the healthy.

CASE OF VERY SEVERE SPINAL IRRITATION QUICKLY CURED BY A SPINAL IRRITANT.

CASE VII.—*Mary S—*, *æt.* 18.

August 27th.—Ill for two days. Constant and severe abdominal pain, with occasional paroxysms of increased violence; tenderness on pressure.

Tinct. Merc. cor. (1), *gt. j o. hora.*

I at first gave the bichloride, under the impression that the symptoms were due to peritonitis, but on more careful examination found that a mistake in diagnosis had led to an error in treatment.

28th. Morning.—Much the same as yesterday. Continue medicine.

Evening.—Was summoned in great haste, with a message that she was dying. When I entered the house, I should have supposed, if I had believed the case to be one of immediate danger (judging from the countenances of the family and assembled friends), that she was dead. Found that she had a sensation of choking in the throat, accompanied by a rattling noise. There was also constant and severe pain in the abdomen, increased at intervals, with great tenderness on pressure; also twitching of the muscles of the extremities (*subsultus tendinum*). This last symptom, together with the absence of fever, led me to suspect that the symptoms were due, not to peritonitis, but to spinal irritation. On more particular examination, I found that the abdominal tenderness was very superficial (although deep as well), and that there was tenderness also in the lumbar region of the spine. I now felt no doubt that the symptoms were due to irritation of the spinal cord, and was thus led to prescribe the most powerful and undoubted irritant of that organ—*Nux vomica*.

29th.—A more decided improvement than I had ventured to anticipate. All the symptoms greatly mitigated.

30th.—Further improvement.

September 1st.—Abdominal pain relieved, but still occasional twitching; also great debility, but may be considered convalescent.

She continued to improve, and though her recovery was retarded by an attack of menorrhagia at her monthly period, which caused her perfect convalescence to be tedious, she had no recurrence of the acute attack.

Nothing could be more marked, however, than the immediate favorable effect produced by the medicine last given.

SECOND CASE OF SPINAL IRRITATION, VERY RAPID CURE BY A SPINAL IRRITANT.

CASE VIII.—*August 29th.*—It is a remarkable coincidence, that on the second evening after the commencement of the above attendance, I was sent for to a very similar case in a young man.

John S—, æt. 20.—His mother sent for me in great distress, thinking him in much danger. I could not go immediately, but judged from the description of the messenger that he was labouring under inflammation of the bowels, and therefore sent a mixture containing the Tincture of Bichloride of Mercury. I saw him in an hour or two, and found his friends in as great distress as in the case last mentioned. He had received no relief from the medicine which I sent. He was suffering from excessive abdominal pain, with great tenderness on pressure; the pain increased in paroxysms; tympanitic distension. The pulse, however, was not an inflammatory one, nor was there much heat of skin, or other symptoms of fever, and I therefore referred the symptoms to spinal irritation, and prescribed *Nux vomica*.

August 30th.—A most marked relief in the symptoms quickly followed the exhibition of the remedy.

31st.—Continues better.

September 1st.—Convalescent, and gone out.

The result in both these cases furnished a proof of the correctness of the diagnosis, and an additional confirmation of the truth of the homœopathic law.

The more tardy recovery in the former case may be accounted for by the presence of uterine complication. Nothing would be more foreign to the thoughts of an ordinary practitioner than the administration of *Nux vomica*, a most powerful spinal irritant, in a case of spinal irritation. My only guide in the selection of the remedy which was so strikingly successful, was the law, "*Similia similibus curentur.*"

I no longer felt any doubt that this was nature's law of cure, although I thought it wiser to delay for a while longer my avowal of its adoption. If, then, any of my previous trials of the principle could, in a sense, be considered as "experiments," this would be true no longer. The temporary mistake in diagnosis, made in both these cases in the first instance, was very instructive in several points of view.

1st. As an additional confirmation of the principle. The cases were at the first unwittingly not treated homœopathically, because some of the symptoms leading to the choice

of the appropriate remedy were not observed, and so long as this was the case the patients got no better.

2d. The difficulty in diagnosis in such cases as those just referred to, shows the great advantage of employing remedies which, even when they do not *cure*, never *kill* the patient.

When a student in London, I recollect a fellow-student bleeding a girl who was a hospital patient, and who was suffering from the same affection as the last-mentioned patients, and with the result not only of a great aggravation of the symptoms, but also a temporary loss of sight. In another hospital, I watched one of the most celebrated physicians in London, direct frequent bleeding with leeches, until the patient, also a young woman, was reduced to a state of anæmia or bloodlessness, without any improvement in the abdominal pain and tenderness; when he suddenly discovered his mistake, and reversed his treatment—ordering tonics and stimulants. In each of these cases, and many others which I have seen of a similar kind, it would have been incomparably better for the patient if nothing had been done, or an *unsuitable* homœopathic medicine of a high dilution given, which amounts practically to the same thing.

3d. The close similarity of symptoms which frequently results from diametrically opposite morbid states, is one proof amongst others of the necessity of a thorough medical education for the successful practice of homœopathy, although an error in diagnosis and treatment may be only negatively injurious in this case.¹

¹ This remark may, at first sight, appear inconsistent on the part of a practitioner of a system of therapeutics, in which the study of symptomatology forms so prominent a feature. In the case, however, of an observer, either without experience, or without education, symptoms, especially of an objective character, may escape the notice of the untaught eye, or ear, or hand. The revelations of the stethoscope, the pleximeter, the speculum, the microscope, and the test-tube, and other aids to the senses of the observer, will illustrate what I mean. In deprecating lay practice in *serious* cases, I might also have spoken of the very great advantage of being able to foresee and warn the patient or friends of the probable issue of the case—an advantage only second to the power to cure disease—but to dwell further on such matters would be irrelevant to the object of my paper.

SEVERE COLIC—QUICKLY CURED BY BELLADONNA AND NUX VOMICA.

CASE IX.—*Mr. D.*—*September 22d.*—Sent for me in great haste early this morning. I found him, at 6 a.m., labouring under the following symptoms. Agonizing pain in the abdomen, aggravated at intervals; rather relieved by pressure; pain had continued for several hours before I saw him; constant vomiting.

The occasion of the attack appeared to be his having dined yesterday on meat-pie.

Ordered two mixtures, each containing a drop dose of Tinct. Belladonna (1), and Tinct. Nux vomica (1). A tablespoonful to be taken every half-hour in alternation.

11½ a.m.—Pain continues, although considerably relieved in intensity. Still vomits shortly after taking anything, even the medicine. Feeling convinced that the stomach was in such an irritable state that it could not tolerate the presence of a *tablespoonful* of fluid, I directed that he should take the medicine by *teaspoonfuls*.

Evening, 10 p.m.—States that he was able to retain the smaller quantity of the medicine, and found almost immediate relief after doing so. After taking a dose or two he had not the slightest return of pain, and quickly fell asleep. Used the expression, that the effect was “like magic.”

23d.—Has had no return of pain or vomiting; feels quite well.

This patient was cured by Belladonna and Nux vomica. I am aware that Belladonna will not be admitted by allopathists as a medicine homœopathic to a case of colic. The experiments of homœopathists, however, prove that it is so. Hence, amongst the symptoms produced by it in large doses, Jahr, in his ‘Symptomen Codex,’ vol. i, pp. 254-5, mentions the following: “Vomiting of bile and mucus; burning in the abdomen; colic, constipation, with cructations and inclination to vomit; colic, as if a spot in the abdomen were seized by the nails,” &c., &c. It was on this ground that I administered the remedy. Besides which, it could only be by its homœopathic action that this medicine could produce any effect in so small a dose (the 100th part of a drop of the tincture). A medical man, sceptical as to the reality of homœopathic action, would not admit any effect to be producible by such a dose. Nux vomica, however, is generally known by the profession to produce a spasmodic condition of the abdominal viscera, through its action on the spinal and ganglionic nervous systems. The cure in this case was clearly effected on the homœopathic principle; so far as produced by Belladonna, by the provings of

homœopathists themselves; so far as produced by *Nux vomica*, by the testimony of allopathic writers.

COLIC—RAPID RELIEF.

CASE X.—*November 8th.*—*Mrs. M*—, an elderly, very stout person, who is subject to violent attacks of abdominal spasm, sent for some medicine by her husband. He said she was suffering very severely, but as I had attended her in similar circumstances several times before, I need not give myself the trouble of visiting her. I sent her the same medicines that I had found so successful in the previous case.

9th.—She states that the pains were quite relieved by the medicines in about two hours, and have not returned since. She added, that she was quite as rapidly relieved as she had been by the medicines I had given her in former attacks (grain doses of opium). I need scarcely say, however, that the recovery was much more complete on the present occasion. There was no debility, headache, or constipation, as the result of the medicines administered.

CHRONIC COLIC—CURED BY SMALL DOSES OF OPIUM AND NUX VOMICA.

CASE XI.—*Ann B*—, *et. 41.* *August 24th, Tuesday.*—Has had colicky pains in the abdomen since Saturday last; they have gradually become worse, and are now intolerable. Sits leaning forward, and bent almost double.

St. Tinct. Opii (1), gt. j.
Tinct. Nucis vomicæ (1), gt. j.
4tis horis.

Evening.—Pain partially relieved.

25th.—Pains now very slight.

26th.—Pain quite gone.

She has had no return of it since.

I anticipate the same objection from my professional brethren, to the use of a dilution of Tinct. Opii, in this case, as to the use of *Belladonna* in the former ones. I can only make the same reply, that the “provings” of homœopathists have demonstrated it to be homœopathic to certain forms of colic. At all events, the 100th part of a drop of the Tinct. Opii would not be considered by allopathists to have any *direct* efficacy in this disease.

CHRONIC COLIC.

CASE XII.—I have very recently rapidly cured a poor woman of two attacks of colic, recurring within a few weeks of each other, and which nearly resembled in their symptoms the *Colica pictorum* (painters’ colic, a disease produced by lead), by alternate doses of *Plumbum* and *Nux vomica*. In

one of these attacks she had been suffering severely for several weeks before I saw her; in both she was relieved in a few hours.

It will probably be known to most of my readers that the oxide or carbonate of lead is the exciting cause of "painter's" or lead "colic," and that, therefore, the medical preparations of lead are strictly homœopathic to cases of colic which resemble in their symptoms the disease thus produced, *when arising from another cause*; for the assertion that the practice of homœopathy consists in administering smaller doses of the *same* poisons which have produced the disease to be treated, is a caricature and a libel.

BRONCHITIS, WITH INFLAMMATION OF THE LUNGS, WITH COLLAPSE—RAPID CURE.

CASE XIII.—October 16th.—Wm. O'B—, *æt.* 6 months.

Urgent cough; extreme dyspnœa; loud wheezing; great collapse; hippocratic countenance; *had been taken to a surgeon before I saw it, who gave very little hope of its recovery, and told the mother she had better take it home, and get a note for the parish doctor, or she would be in danger of having an inquest held over it.*

Arsenicum, Phosphorus, alternately $\frac{1}{4}$ hora.

October 17th.—Panting less urgent, but still considerable; loud mucous râle; prostration less; countenance less anxious.

18th.—Great improvement in all the symptoms; râles not so loud; panting less.

19th.—Symptoms of chest affection and collapse quite gone; no wheezing; countenance natural.

I have seen very few recoveries, even in children, from such a condition as I found this child in two days before this report, and do not remember ever to have seen so *rapid* a recovery.

I called again several times; there was no relapse, or need of further treatment.

INFLAMMATION OF LUNGS—IMMEDIATE IMPROVEMENT AND RAPID CURE.

CASE XIV.—December 9th, 1858.—Wm. F—, *æt.* 33.—A brewer's man, and, according to his own admission, takes several quarts of ale daily; is in other respects a bad subject; stout and of lymphatic temperament, and relaxed habit; has been ill about a week; been feverish; had diarrhœa, with severe pain in the chest; now pain in chest chiefly on right side; crepitant râle all over right lung; panting; rusty expectoration; pulse 110, full and strong; hot, dry skin; and other symptoms of inflammatory fever.

Aconite, Phosphorus, alternately every hour. Sinapism to chest.

10th.—A decided improvement; pulse fallen to 84, and much softer; little heat of skin; dyspnoea much lessened; neither respiratory murmur nor crepitant râle heard near apex of right lung; near base, bronchial respiration and crepitant râle both heard; sputa continue rusty; rawness, but not pain in the chest; had had on a mustard poultice, but this certainly would not account for the change in the symptoms, indeed, he says that he finds relief after each dose of the medicines, though it is more marked after the Phosphorus than the Aconite. The correctness of my report on this occasion is confirmed by the presence of a medical friend.

11th.—No further change.

14th.—Continued improvement; no dyspnoea nor fever; cough much better; sputa diminished in quantity, and improved in quality, contains only rusty streaks.

16th.—Sputa now clear white; dyspnoea gone; no crepitant râle heard in any part of affected lung, bronchial roughness only.

18th.—Convalescent, but weak.

He returned to his work in another week or two.

Phosphorus was the medicine on which I chiefly relied in the treatment of both the last-mentioned cases. This medicine is found by the experiments of homœopathists on the healthy to induce congestion of the lungs; hence its homœopathic effect in congestive and inflammatory diseases of those organs.

Dr. Taylor, also, in his work on Poisons, refers to cases of bronchitis and pneumonia caused by the inhalation of the vapour of Phosphorus; a fact, indeed, easy to understand by daily observation of the irritation of the air-tubes caused by the combustion of lucifer matches.

In the case of pneumonia, first referred to, Arsenic was given, because, being a poison which produces rapid sinking, when administered homœopathically, it tends remarkably to antidote this condition; in further illustration of which, cases are adduced in the sequel.

ACUTE BRONCHITIS IN AN INFANT VERY RAPIDLY CURED BY ACONITE.

CASE XV.—*Mr. S—'s infant, æt. 6 months. December 27th, 1858.*—Had cough since Friday; wheezing since Saturday, with feverish, restless nights. Now general bronchitis; rough cough; examined by stethoscope; sibilous and sonorous râles on both sides all over anteriorly. Pulse 140, with much heat of skin, and other symptoms of fever. Oppressed countenance. Takes no notice of anything.

Tinct. Aconite (1), gt. $\frac{1}{3}$ o. hora.

Evening.—Some improvement.

December 28th.—Great improvement; quite playful; had disturbed night, but is much better to-day; fever nearly gone, and breathing much better; cough still troublesome.

30th.—Quite well.

BRONCHITIS CURED BY ACONITE AND NUX VOMICA.

CASE XVI.—*Mr. B—'s son, æt. 14 months. November 11th.*—Fever; short, quick respiration; wheezing cough.

Tinct. Aconite, Tinct. Nux vomica.

12th.—A little better.

17th.—Quite well.

SUB-ACUTE BRONCHITIS.

CASE XVII.—*Mrs. S—, æt. 64. December 30th.*—Has had a cough, and difficulty of breathing for several weeks; now confined to bed; loud wheezing heard all over the room; pulse 96; sputa muco-purulent; chest resonant on percussion; sibilous and sonorous râles heard all over chest; pain in left side of chest, increased by deep inspiration.

Tinct. Bryonia and Phosphorus.

31st.—Some improvement; free perspiration.

January 1st, 1859.—Decided amelioration of symptoms; pulse 80; wheezing not heard except on application of stethoscope; respiratory murmur heard with sibilous râles in right lung, and more distinctly in the left.

7th.—Continued to improve until yesterday, when she got up and took fresh cold; dry râles on both sides now almost entirely mask respiratory murmur; cough and expectoration almost ceased; sputa globular and semi-transparent; pain in sternal region.

Rep. Phosphorus and Bryonia o. hora.

8th.—Much the same; headache.

St. Tinct. Belladonna in alternation with the other medicines.

9th.—Great improvement both in general symptoms and stethoscopic signs.

13th.—Respiratory murmur heard all over chest; râles only in one or two situations.

16th.—Convalescent, but weak. Has had no further relapse.

SUB-ACUTE BRONCHITIS—RAPID RECOVERY.

CASE XVIII.—*Mr. Anthony G—, bone-turner. April 21st, 1859.*—Il five or six weeks; cough, with difficulty of breathing; sonorous and sibilous râles heard all over both lungs anteriorly; vocal resonance on both sides; expectoration difficult, sputa tough and stringy.

Tinct. Spongia and Phosphorus.

23d.—Cough and dyspnœa much lessened; expectoration free.

25th.—Respiratory murmur heard all over both sides of chest, without any morbid sounds whatever; no dyspnœa, and little cough.

27th.—Gone out when I called.

My own experience confirms the impression I had gained from the perusal of statistics as to the remarkable results of the homœopathic treatment in chest affections.

I have had several phthisical patients who have received decided benefit from the medicines. I have now under treatment a gentleman more than eighty years of age,

suffering from general and acute bronchitis, who was cured a few months ago under a similar attack, and who is now a second time deriving the most striking benefit from the treatment.

I to-day (April 25th) examined the chest of a man who had been labouring under chronic pneumonia many weeks, and gradually getting worse under empirical treatment, when he consulted me a fortnight ago.

I found then that one lung was extensively solidified. There has been a gradual improvement, however, in the general symptoms, and on the application of the stethoscope to-day I had, for the first time, the satisfaction of hearing that air had begun to permeate the tissue which had been so long closed to its entrance.

Although I have given other medicines, I have reason to believe that Phosphorus has been the main instrument of the improvement in this case, and Arsenicum in the last-mentioned one.

SEVERAL CASES OF VOMITING CURED BY AN EMETIC SUBSTANCE—
IPECACUANHA.

CASE XIX.—*Mrs. H.*—*August 10th.*—Suffers from attacks of obstinate vomiting caused by uterine irritation, which generally require a long course of treatment for their alleviation.

Tinct. Ipecac. (1), gt. j 2dis horis.

11th.—No return of vomiting since she took the medicine.

12th.—Vomiting entirely ceased.

CASE XX.—*Alfred B.*, æt. 26. *September 20th.*—Has been labouring under chronic bronchitis for a considerable period, and the fits of coughing frequently terminate in vomiting.

St. Vin. Ipecac., gt. ij 4tis horis.

30th.—Complete relief to the vomiting, although still suffering from cough, &c. Has not now vomited for a week.

Substituted the effervescing medicine for the Ipecac., as a trial of its comparative efficacy.

October 7th.—The vomiting having returned, he requests the former medicine to be repeated.

CASE XXI.—*William W.*—*December 28th, 1858.*—Ill of pulmonary consumption, and has vomited every morning after breakfast for some time; has been taking a small dose of Ipecacuanha the last fortnight, two or three times daily, by means of which he has found entire relief from this troublesome complication.

LONG-CONTINUED VOMITING FROM PREGNANCY RELIEVED BY IPECACUANHA
AND ARSENICUM.

CASE XXII.—*Mrs. L—*. March 18th, 1859.—About seven months pregnant; has vomited after every meal for more than two months; is very weak, and in consequence feels and looks very ill, so that she has at length become alarmed, and sent for me late in the evening.

Tinct. Ipecac.,

Arsenicum (1), 4tis horis alternately.

March 19th.—No return of the vomiting, except very slightly last night.

21st.—Not vomited once for two days.

23rd.—No return of vomiting.

24th.—No return of vomiting.

Omit Tinct. Arsenicum, and continue Tinct. Ipecac. ter die.

26th.—Slight return of vomiting after going to bed at night.

Continue Ipecac. and Arsenic.

April 1st.—Vomiting continues to return slightly once a day. Great improvement in the appearance and strength.

It was not surprising that there should be a slight and partial return of the vomiting, so long as the source of irritation necessarily continued to exist.

Nothing, however, could be more irrefragable than the fact that the medicine had first entirely set aside, and afterwards greatly relieved, the vomiting.

These cases of vomiting, cured or relieved by emetic substances, are interesting examples of homœopathic action—

1st. Because of the well-established and uniform action of the substances in large doses.

2d. Because of their unfailing efficacy in curing cases of mere functional vomiting, and their frequent success in palliating the symptoms in cases where the vomiting is due to organic disease.

3d. Because on no principle but the law of similars can any explanation be offered, of their action, of the slightest plausibility.

4th. Because of the extreme uncertainty of the action of any of the remedies of the old school in such cases.

DIARRHŒA CURED BY INTESTINAL IRRITANTS.

CASE XXIII.—*Mrs. H—*, æt. 78. October 15th, 1858.—Severe diarrhœa for several days. Says that she has been purged about twenty times in the night, although she has been taking a medicine containing prepared chalk.

St. Arsenicum (1), gt. j o. hora.

Evening.—Great relief; has been moved only three or four times since she began to take the Arsenicum.

16th.—No return of diarrhœa; bowels not moved since yesterday; feels better altogether.

18th.—No return of diarrhœa.

RELAPSED DIARRHŒA CURED BY INTESTINAL IRRITANTS.

CASE XXIV.—*Mrs. S—, æt. 73. November 13th.*—Has been recently cured of an attack of diarrhœa by Arsenicum, relapsed in consequence of an error in diet.

Rep. Arsenicum (2), 2dis horis.

14th.—Diarrhœa continues, though checked.

16th.—Only partial relief.

Continue Arsenicum, in alternation with Veratrum and Merc. corrosiv. (3).

17th.—No return of Diarrhœa since yesterday.

18th.—Convalescent.

DIARRHŒA CURED AS ABOVE.

CASE XXV.—*Mary H—, æt. 38. October 8th*—Five or six weeks ago was in a public institution, where the diet did not agree with her, and where she had no choice. Ever since has been troubled with diarrhœa, which has induced great debility, and also a swollen (œdematous) condition of the lower extremities, and a cachectic condition of the whole system. All these symptoms being clearly indicative of Arsenic, I had great expectations from the use of the remedy, and they were more than realised.

10th.—Diarrhœa ceased.

20th.—Discharged cured.

Amongst the symptoms produced by Arsenic are not only diarrhœa, but general debility and cachexia, and anasarca consecutive on this state of things. Hence homœopathy is able to solve the rapid recovery of this patient, explicable on no other principle.

CHRONIC INFLAMMATION OF STOMACH AND BOWELS (GASTRO-ENTERITIS), CURED BY A GASTRIC IRRITANT.

CASE XXVI.—*Sarah S—, æt. 38, a maid-servant. December 18th.*—Has an unhealthy worn-out look; has been ill for several weeks, suffering from pain in the stomach after all her meals, which still continues unabated. There is also excessive tenderness on pressure in the epigastric region, with general abdominal tympanitis; general debility; œdema of legs and feet.

St. Tinct. Merc. bichlor. (3), gt. j 4tis horis.

19th.—Very much relieved by the medicine; the pain has only returned once to-day; abdominal tenderness and tympanitis diminished; passed a considerable quantity of water; and œdema nearly disappeared.

21st.—Has neglected to take her medicine regularly, and has been careless in her diet; the abdominal pain and tenderness and the tympanitis have consequently returned.

Repeat medicine.

22d.—Decided improvement.

23d.—Very considerably better. She came for no more medicine after this date, and I lost sight of her for about a week, when she returned to thank me very warmly for her recovery, and apologise for her neglect in staying away so long.

I attended this person on the parish account, but her mistress, who was not a homœopathist previously, and whom I had never before attended, was so much struck with the benefit which homœopathy had conferred upon her servant, that she has since herself become a patient of mine.

CASE OF ACUTE AND AGGRAVATED TONSILLITIS, WITH LARYNGITIS, CURED
BY ACONITE, BELLADONNA, AND SPONGIA.

CASE XXVII.—*George W—, æt. 47.* Admitted *November 13th*, with inflammation of tonsils and larynx; excessive difficulty of breathing. The breathing sounded as if the air were passing through a trumpet, and could be heard all over the house. There was pain and tenderness on pressure in the larynx; speaks in a low, hoarse, cracked voice; able only to expectorate a small quantity of tenacious mucus; low fever; great prostration of strength, and feeling of oppression; great pain and difficulty in swallowing; loud, barking cough.

Tinct. Aconite and Belladonna, o. $\frac{1}{2}$ hora.¹

14th.—Difficulty of breathing somewhat lessened; ronchus not so loud; dysphagia diminished.

Continue medicines, and add Tinct. Spongia.

15th.—Much as yesterday.

16th.—Great improvement in the symptoms; the loud râle in throat quite gone, and dyspnoea and dysphagia very much diminished; larynx still tender to the touch; the other morbid symptoms greatly abated. From this time there was a progressive improvement, and he was convalescent in a few days.

The convalescence, however, was tedious, owing to the state of debility to which he had been reduced, as well as to poverty, and to the fact of his having had more than one paralytic stroke previous to his present illness. I was not able to discover the presence of false membrane (though I think it is very probable that the hoarseness and rattling breathing and cough were owing to its presence in the larynx). I cannot therefore describe the case as one of true diphtheria, though the symptoms, I am persuaded, were much more alarming than in numbers which have been so described.

¹ Whenever more than one medicine is named, it is to be understood that they were ordered to be taken *in alternation*.

SCARLATINAL RHEUMATISM RAPIDLY CURED BY ACONITE AND BRYONIA.

CASE XXVIII.—*Mr. P—'s son, æt. 8. September 29th, 1858.*—Scarlet fever; sore throat; hot skin; rapid pulse; pain and tenderness in joints of extremities.

Aconite and Bryonia $\text{o. } \frac{1}{2}$ hora, alternately.

The medicines began to produce mitigation of the symptoms in a few hours, and the fever, sore throat, and pains in the joints rapidly gave way, and in a week he was perfectly convalescent, and not so weak as might have been expected from the severity of the disease.

October 6th.—Discharged cured.

SCARLATINA—SORE THROAT—MUCH FEVER—RAPID CURE BY ACONITE, BELLADONNA, AND BARYTA.

CASE XXIX.—*Mr. P—'s daughter, æt. 16, sister of the last mentioned. October 17th.*—Has taken the scarlet fever; has been ill several days; now scarlet eruption; burning skin; tonsils much enlarged; mucous membrane of palate deeply injected, and of a purple colour; great difficulty in swallowing; pulse 120.

Tinct. Aconite, Belladonna, and Baryta.

18th.—Some mitigation of the fever.

19th.—Decided improvement; skin cool; pulse 96; still great dysphagia, though the palatal mucous membrane is less injected and the tonsils less swollen.

20th.—Fever keeps down, and considerable improvement in the local symptoms.

22d.—No return of fever; swelling and inflammation of tonsils and palate cured; no difficulty in swallowing; debility only remaining, but able to walk about the room; and I had not occasion to visit my patient again.

This is one of the cases of which I can truly say, that I do not remember under the old treatment ever to have seen so rapid a recovery from symptoms so severe, the local affection being, in cases which in the end do well, generally very troublesome and persistent.

The only auxiliary treatment made use of in this case was on my first visit, when I applied the solution of nitrate of silver to the tonsils, but as it did not appear to do any good, I did not repeat the operation.

TONSILLITIS WITH FEVER—RAPID CURE BY ACONITE AND NUX VOMICA.

CASE XXX.—*Mrs. S—. October 19th, 1858.*—Been ill a few days with sore throat and fever; now great difficulty of swallowing; appears much oppressed, and says that she is obliged to sit up all night, as it takes her breath when she lies down; no chest affection, but tonsils and palate much inflamed; fever; vertigo, and sensation of heat in the head.

Tinct. Aconite and Nux vomica in alternation.

I also ordered a nitrate of silver gargle, chiefly because she was not a homœopathist, and I feared would not be satisfied with tasteless medicines.

20th.—Some improvement, but giddiness continues.

St. Tinct. Belladonna instead of Nux vomica; continue Aconite.

21st.—Expresses herself as very much relieved by the medicine; the giddiness nearly gone.

22^d.—Further improvement; throat nearly well, and all the morbid symptoms greatly abated. Told her for the first time of "the new treatment," when she remarked that "something had cured her very rapidly."

25th.—Discharged cured.

MELANCHOLIA, CURED BY STRAMONIUM.

CASE XXXI.—Several months ago, a lady brought to my surgery a young girl not twenty-one, who, I was informed, had always been of an excitable disposition and passionate temper, but who had never shown any tendency to aberration of mind. Her friends informed me that she had lately been residing with a person who for some trifling fault had treated her harshly, and threatened her with both temporal and eternal punishment; that she had consequently been much depressed in mind, and during the last few days had become insane. She stated that she was quite sleepless, and in constant fear of impending evil, which at times rose to a state of extreme excitement. When the girl was brought to my house she had the appearance of a person suffering from "delirium tremens." She was in constant agitation, looked suspiciously and wildly at every person who came near to her, inquired as to their character and motives, gave me to understand that she dreaded being sent to prison, also that she very much feared death. On her friend offering to leave the room to speak to me alone, she clung piteously to her, begging her not to go away, as she dared not be left alone.

I may here mention that the object for which her friend wished to speak with me privately, was to arrange with me about her removal to the asylum, a measure which not only herself but several other friends who had seen the girl, thought there would be no escape from. Having, however, had so many proofs of the power of homœopathic remedies, I requested that before giving a certificate I might be allowed to try the effect of the appropriate medicine. I therefore prescribed

Tinct. Stramonium o. $\frac{1}{2}$ hora.

I gave the first dose at my surgery, which had an undoubted effect in calming her before she left the house.

I visited her in the evening at home, and found that a remarkable change had taken place in her symptoms. Though there was some timidity manifested in her demeanour, there was no wildness or hallucination.

This change her relatives assured me had taken place after a few doses of the medicine.

She continued to improve, and though the object of my last two or three visits was rather to ascertain whether her convalescence continued or not, than because she needed further treatment, yet my attendance entirely terminated in ten days from her first coming under my notice.

I considered this case a remarkable illustration of the power of the remedy. Dr. Copland, 'Dictionary of Medi-

cine,' vol. ii, page 454, says that six months is the average duration of cases of melancholia terminating in health.

In about three weeks after the complete recovery of the last-named patient, during which period she had been able to earn her living, she was much alarmed by the visit of a person whom she had learned to regard with dread at the commencement of her former illness; the consequence was that she had a relapse, and when I visited her on the following day I found her in precisely the same state as before, full of apprehension and restlessness, in a continual state of tremor, and dreading every person who approached the house. I repeated the medicine which I had found of such signal benefit before; the effect was not so immediate as on the former occasion; in a few days, however, she was convalescent. The testimony of the parents was very emphatic as to the value of the medicine; they stated, when she was at the worst, that she was calmed by every dose. This testimony was confirmed by the fact that on one occasion when I visited her, when her medicine had been finished and she was out of it for about twelve hours, I found her considerably worse in consequence.

The same patient had a third attack about a month after her recovery from the preceding; this time it was induced by a physical cause, she had taken cold, and had fever, sore throat, &c.

The predisposed organ became secondarily affected, and she again became incoherent and excited in mind, though less so than on the two former occasions. In addition to the Stramonium, I gave, on this occasion, medicine to cover the other symptoms of her case, and she was a third time convalescent in about a week, and has, I believe, remained well since (it is now about two months since the termination of my last attendance on her).

MELANCHOLIA, RELIEVED BY STRAMONIUM.

CASE XXXII.—I had, a few months ago, another illustration of the power of the remedy which I had found so efficacious; in the case of a middle-aged woman, whose hallucinations were of a more extravagant character than in the last-mentioned case. She believed that herself and husband had been the cause of bringing the world to an end; that there was a design upon her life, &c., &c.

I found here Stramonium also of decided benefit. The excitement was calmed, the hallucinations removed for a time, and the disease would probably have been cured, but her husband being her only attendant, and he having to leave her to go to his work, the administration of the medicine was neglected: the idea that there was a plot to poison her returned, and she refused consequently to take the medicine, and had to be removed to an asylum.

For provings of Stramonium, see Appendix, page 58.

TYPHUS FEVER, CURED BY HOMŒOPATHIC MEDICINES WITHOUT THE AID OF STIMULANTS.

CASE XXXIII.—*Benjamin C.*, æt. 17. *November 25th.*—Has been ill a few days; has now all the symptoms of confirmed typhus; muttering delirium; picking of the bed-clothes; black sordes upon the tongue; rapid, feeble pulse, &c., &c.

Tinct. Aconite, Belladonna, and Bryonia.

26th.—A little amelioration in symptoms.

27th.—Further improvement.

28th.—Is now perfectly sensible, and better in every respect.

December 1st.—Come down stairs, and complains only of weakness.

6th —Walked to my surgery.

TYPHOID FEVER, CURED BY HOMŒOPATHIC MEDICINES ONLY.

CASE XXXIV.—*William P—, æt. 13.*

First visited on Monday, *November 29th, 1858.*

He had been ill since the Sunday week, his mother attributing the attack to excessive depression of spirits, caused by the death of a near relative.

Had delirium, and the other symptoms of typhoid fever, when first seen; though the disease was milder than in the case just referred to, and the recovery also more rapid.

I gave the same medicines, and there was very rapid improvement, and on the following Thursday the entry in my case-book is that he was convalescent, though weak.

In neither of these cases of fever was there any resort to stimulants, or any adjunctory treatment.

TWO CASES OF CONVULSIONS, WITH COLLAPSE, AND RECOVERY.

CASE XXXV.—*Thomas C—, November 29th, 1858.*

Was applied to by an order from the relieving officer to visit a young infant, whom I found in a state of deep collapse, following a series of convulsive attacks; pale and cold, and semi-comatose; "hippocratic" countenance; almost pulseless; eyes fixed, and apparently dying. This was a case in which I should not have had the slightest hope of the recovery of the patient, but for the many proofs that I had had of the surprising power of homœopathic remedies in apparently desperate cases.

I ordered a very small dose of Arsenic, to be given every quarter of an hour, day and night. On the following day the little patient had rallied considerably; the mother told me she had sat up all night to give the medicine regularly. On the succeeding day the improvement was so great that I considered it out of danger, and in little more than a week it was quite well.

CASE XXXVI.—*Mary Ann M—, æt. 1 month. On December 22d, 1858,* I was called to a case almost the exact counterpart of the preceding, except perhaps that the state of collapse was not quite so profound. The entry I made in my case-book after my first visit was, "Convulsions; collapse; appears sinking."

By the diligent administration of the same remedy, which had proved so efficacious in the last-mentioned case, there was a decided improvement manifest on my visit the next day; and in six days the little patient was discharged cured.

I may make the same remark in reference to the two last-mentioned cases that I have made several times already, viz., that there is not the shadow of a ground for any hypothesis explanatory of these cures to stand upon, except the homœopathic law. Imagination, to which the credit of

homœopathic cures is so often given by the opponents of homœopathy, when they cannot deny the fact of some influence having been exerted, can have had no place here. The principle "*similia similibus curentur*" affords the only and sufficient explanation.

Taylor, in his work on Poisons, mentions several cases in which Arsenic taken in poisonous doses has produced convulsions. At page 319 there is the following account of the symptoms which preceded death in the case of a young child which had been poisoned by it. "The surface was cold; lips livid; eyes sunk, pupils fixed and rather dilated; pulse scarcely perceptible; respiration feeble, accompanied with sighing." And at page 321, in regard to the case of another child poisoned by Arsenic, he uses the following language: "When first seen she was in a comatose state; she had been sick and convulsed, and had suffered severe pain, but now there was complete insensibility, the face was swollen and of a livid hue, the pupils dilated, the breathing difficult, the extremities cold."

Thus the symptoms in these cases of poisoning *caused* by Arsenic bore a very close resemblance to those in the two cases of disease just described, and which were *cured* by minute doses of the same poison.

COMATOSE SYMPTOMS, CURED BY OPIUM.

CASE XXXVII.—*Charles T—, æt. 8 months.* Was first visited *August 3d, 1858*; I found it with the eyes fixed (I omitted to examine the pupils); the jaw fallen; in a state of deep lethargy, perfectly insensible, and incapable of being roused.

Tinet. Belladonnæ o. $\frac{1}{2}$ hora.

4th.—No decided amelioration of the symptoms. I then made a mixture with one drop of Tinet. of Opium to half a pint of water, and directed a teaspoonful to be given every quarter of an hour.

5th.—Found a striking alteration in the symptoms; the child's mother says it has been "on an end" all day; it is perfectly sensible, and appears to have very little the matter with it.

There was no relapse from this state of matters.

After the remarks which have been made on previous cases, few of my readers will need an explanation of this. Most persons are aware that Opium produces symptoms

similar to those which were found in this child ; hence the case is a very simple illustration of the homœopathic law.

DROPSY OF THE ABDOMEN (ASCITES), CURED BY MINUTE DOSES OF
TINCTURE OF CANTHARIDES.

CASE XXXVIII.—*Mary Ann M—*, *æt.* 41. Admitted *July 19th*, 1858, by order of the relieving officer.—(This case is in some respects more remarkable than any to which I have referred.) Her health appeared completely broken, but dropsical symptoms did not manifest themselves until about a month after this time.

She had been out of health for a considerable time, and, in consequence of the general and extreme state of cachexia and debility in which she was at the time when ascites (dropsy of the abdomen) became developed in an aggravated form, I, with a medical friend who examined her with me, considered her case as hopeless, and therefore acted (as is not unusual with practitioners of the old school) on the expectant plan, prescribing merely a “placebo” to prevent the patient becoming depressed with the idea that her case was a hopeless one, and, with my friend, watched the progress of the case. This was so unsatisfactory that I several times reported her in the weekly medical return made to the Guardians of the Poor as “gradually sinking.” When this state of matters, however, had continued a good many weeks, it occurred to me, I scarcely know why, that I would try the effect of an homœopathic medicine, and as there was suppression of the secretion of the kidneys, I chose a remedy which, in large doses, produces this symptom, and prescribed a small fraction of a drop of the Tincture Cantharides, to be taken several times daily.

To my agreeable surprise, a marked and almost immediate effect was produced. A copious flow of urine was induced. A marked reduction in the abdominal swelling was observable in a few days, and in a month from the first administration of the remedy it was entirely gone.

The improvement in the general health also was very decided, and when I ceased to attend the parish patients, in March last, she was quite convalescent, though not robust, and exceedingly grateful for the benefit she had received, and quite an enthusiastic adherent of the new system of practice.

ANASARCA AFTER SCARLATINA.

CASE XXXIX.—I mention this case chiefly as illustrating the importance of discrimination in the choice of homœopathic remedies. It was the case of a child which I attended in *August*, 1858 ; for about three weeks the medicines ordered produced very little beneficial result ; but as it was the first case of the kind I had treated homœopathically, my not having at first selected the most appropriate medicines was not to be wondered at. When, however, I discovered and prescribed them, an immediate result followed. The secretion of urine, I found on my visit the day after prescribing the fresh medicines (Tinct. Digitalis and Merc. sol.), had lost its smoky colour and become clear, and, on the next day, had more than doubled in quantity.

Each day also the quantity of albumen which was thrown down by heat diminished, and the anasarca swelling of the body declined. In ten days from the change of medicines the patient was cured.

ANASARCA AFTER SCARLATINA.

CASE XL.—*Mr. E's daughter, æt. 5. April 11th, 1859.*—Has been attended by a herbalist for scarlatina, and I have been called in to attend another member of the family, in consequence of the death of another child from the same disease.

When I called this morning I found this little girl suffering from severe consecutive anasarca. The face and legs were much swollen; the cheeks and eyelids so much so, that the eyes were nearly closed, and I was informed that they had been completely so before the child got up. Has passed very little water (certainly not a gill) in the last twenty-four hours, and this has been the case for five or six days; it is also smoke- or moss-coloured.

Tinct. Hellebore (1) and Belladonna in alternation.

12th.—Has passed about a quart of urine since my visit twenty-four hours ago. Anasarcous swelling of face and legs very much reduced. Observing, however, that the parotid glands on both sides were much swollen, and the surface of the swelling over one of them having suppurated, I opened the abscess, and gave Merc. sol. in alternation with the other medicines.

13th.—Micturition continues free; moss-colour not quite gone; free from pain in neck since abscess was opened; face little swollen; legs not at all.

15th.—Micturition free; swelling of face scarcely perceptible; parotid abscesses discharging freely.

21st.—Quite well, except a little remaining induration of the sub-maxillary gland. The child's grandfather, who has been long a rigid teetotaler, says that he is now convinced that homœopathy is as good for sickness as teetotalism is for health.

VERY SEVERE ATTACK OF TETANUS, CURED BY NUX VOMICA AND BELLADONNA.

CASE XLI.—*January 14th, 1859.*—I was called up in great haste about one o'clock a.m., to visit a lady who had been in a delicate state of health for a considerable time, and who had lately had symptoms of phthisis. This lady is of an exceedingly nervous and sensitive temperament, and more susceptible of the influence of medicines, either allopathic or homœopathic, than any patient I ever attended. She had been taking a small dose of Acetate of Morphia (the one twentieth part of a grain) to procure sleep for several nights, which I had given her, because she appeared to need rest, and I had not found the homœopathic hypnotics successful in similar cases.¹ I was at

¹ I have, however, since my adoption of homœopathy, never, except in this case, given Morphia in private, and I think not in parish practice. I felt, in prescribing the medicine on ordinary principles, in a case which appeared likely to be incurable, that I was indicating no want of confidence in the general applicability of the homœopathic law—as a law of *cure* in cases when there was no reason to suppose that disorganization of tissue had taken place; in which cases there is no violation of the principle in seeking to relieve pain, or procure sleep, or in other ways “smooth the passage to the tomb.”

The law of homœopathy is not, however, one of *cure* only, although that is all that its adherents ordinarily claim for it. In many *incurable* cases I

her bedside in a few minutes after being summoned, and found her suffering from all the symptoms of tetanus in an aggravated form. There was complete opisthotonos; the back being arched like a bow, and its weight resting partly on the head and heels (the muscles of the legs and thighs also being spasmodically contracted); but partly supported by the right arm, the muscles of which being also in a state of spasm, it was bent back and under the spine; the left arm was contracted upon the chest, and the fingers firmly clenched upon the palm; jaw locked, and teeth firmly pressed together; clonic convulsions of muscles of face; lips pursed up, and frequently drawn to right side; pulse firm. The pain was so severe during the height of the paroxysm, that the patient has since compared it to all her limbs being stretched upon the rack. She was sensible all the time, calm, and free from excitement; indeed, as far as the spasm and twitchings would allow, her countenance was not only serene, but happy; but she is a Christian, and she has since assured me that she felt very happy in the near prospect (as she supposed) of the termination of all her trials, and her entrance into "the rest that remaineth for the people of God."

There was an attempt at vomiting after I had been with her about half an hour, and this was a very distressing aggravation of the symptoms; for owing to the locking of the jaws, the mouth could not be emptied, and there was a danger of suffocation. A considerable portion, however, of what had been rejected by the stomach, was ejected through the aperture left by a tooth which had been extracted.

The Tinctures of Nux vomica and Belladonna were given, advantage being taken of the aperture to introduce the medicines, which were repeated in alternation every few minutes.

After I had been with her nearly an hour, the spasm of the muscles of the jaw partially relaxed, and we were able, in addition to the medicines, to administer wine and other stimulants; for the violent action of the muscles had evidently caused much exhaustion, as might have been expected, especially in one weakened by previous illness. The spasm of the muscles of the jaw did not entirely cease, however, for several hours. The spinal rigidity gradually lessened, and at half-past two no longer existed; the muscles of the left arm also became relaxed, the finger-joints getting at liberty before the elbow; but the muscles of the right arm continued contracted for several hours longer.

On the next day she appeared no worse than she had been for some weeks. Muscular pain, however, was complained of for some days.

She expressed herself as being conscious of sensible relief from each dose of the medicines. Some weeks afterwards she had a much slighter attack of the same kind.

She has told me that she had an attack of opisthotonos, which continued three days, many years ago, and for which she was treated by an allopathic surgeon, who blistered her all down the spine, without any advantage.

The subsequent pain and stiffness of the muscles was relieved by the same medicines which had brought her out of the acute attack. The more recent attack was also cured by the same means.¹

have found that medicines administered according to the law of similars have been very valuable as palliatives, although occasionally it may be useful in such circumstances to prescribe on the principle *contraria contrariis allevantur*.

¹ When I penned the remarks on the improbability of Strychnia or Nux vomica being proposed as a remedy for tetanus, at page 9, I had not met

I should probably have felt sufficient confidence in the curative influence of *Nux vomica* alone, in a case so clearly homœopathic to it, if I had not felt considerable anxiety and alarm, owing to the extreme urgency of the symptoms; and this led me to alternate its use with that of *Belladonna*, which also covers many of the symptoms of tetanus, although Dr. Watson refers to it very cursorily, and as of little value.

Thus Jahr, in his 'Symptomen Codex,' vol. i, p. 263, amongst the symptoms produced by *Belladonna*, enumerates "tetanic spasms; opisthotonos; paroxysms of stiffness and immobility of all the limbs."

I have entered more fully into the details of this case than I should otherwise have thought desirable, because it appears to me to be one of great interest, not only as to its therapeutic, but also as to its pathological relations.

Whether any of my medical readers be of opinion that the *Morphia* was the exciting or the determining cause of the tetanic convulsions, or that it had nothing to do with them (a conclusion favoured by the fact of the two similar, although milder, attacks of which my patient has been the subject), yet a case is here furnished, which was apparently

with the following remarks of Dr. Watson, in his lectures on the 'Principles and Practice of Physic,' vol. i, pp. 586-7, third edition: "*Strychnia* has been suggested as a remedy for severe tetanus; not in infinitesimal doses, as Hahnemann would, I suppose, prescribe it, but in sufficient quantity to produce a sensible effect. The principle upon which this has been recommended, is the same with that on which the Nitrate of Silver ointment is applied to the inflamed conjunctiva in purulent ophthalmia. We know that *Strychnia* acts upon the spinal cord, affecting apparently those parts and those functions of the cord which are affected in tetanus; and in so fatal a malady, it would be justifiable, I conceive, to give the *Strychnia*, in the hope that it might occasion a morbid action of the disease, and yet be less perilous and more manageable than it. But it would be right to try such a remedy as this, in the first instance, *in corpore vili*, upon one of the lower animals. This, were it successful, would be a cure according to the Hahnemannic doctrine *similia similibus curentur*. A doctrine much older, however, than Hahnemann."

Dr. Watson, in the above extract, speaks as if *Strychnia* had never been tried as a remedy for tetanus. There is no doubt, however, that it has often been given by homœopaths, though he probably would not think of reading their works. It is at all events remarkable, that I should have had two opportunities of proving the value of that substance in a disease of such great rarity as tetanus, in the course of a few months.

unprecedented at the period of Palmer's trial, a case in which the symptoms of poisoning by Strychnia were precisely simulated, although no Strychnia had been taken by the patient.¹

The case, as I have just observed, is a very interesting one, not only on account of its relation to therapeutics, but also to pathology and medical jurisprudence, especially the latter.

The symptoms, in the case of my patient, were precisely those which are described in works on toxicology, as present in cases of poisoning by Strychnia.

They were precisely those which were present in the case of Cook, and which all the medical witnesses for the prosecution, at Palmer's trial, concurred in the opinion as being incapable of being produced by any other cause than Strychnine poisoning.

Thus, Professor Christison is reported to have said—

“There is no natural disease of any description that I am acquainted with, to which I could refer these symptoms; and the result of my experience induces me to come to the conclusion, that the symptoms exhibited by the deceased were only attributable to Strychnia, or the four poisons containing it.”—*Times' Report of Palmer's Trial.*

On the other hand, the occurrence of a case like this, tends to remove the opprobrium which has been cast upon Mr. Nunneley and other witnesses for the defence in the above trial, because they expressed their belief in the possibility of symptoms like those of Cook arising from natural disease. If any of my readers are inclined to attribute the

¹ In order to be satisfied that there was no possibility of Strychnia having been given by mistake for Morphia, as well as to procure an emetic in case there were the least probability of this having been the case, I left the patient during the height of the paroxysm, and returned to my surgery for a few minutes, and was thankful to find that the Morphia bottle was still on the table, and the Strychnia at the top of a high and almost inaccessible shelf, and both also very distinctly labelled. The subsequent progress of the case, however, and the relief afforded by the Nux vomica, were corroborative proofs that my momentary fears were unfounded.

My medical readers, however, will be aware, that if the medicine by mistake had been Strychnia instead of Morphia, yet the dose given (one twentieth of a grain) would have been the smallest ever recommended by allopathic writers.

origination or exaggeration of the symptoms to the Morphia which my patient had been taking, they will perhaps remember that this was the medicine which, no doubt in a very much larger dose than I gave, was agreed on, in the consultation which was held about his case, to be given to Cook. (See *Appendix*, p. 58.)

PERSPIRATION RELIEVED BY A SUDORIFIC (NITROUS ÆTHER).

CASE XLII.—*August 23d*, 1858. *Frances W*.—Confined a few days ago; found her weak, and complaining of profuse perspirations, especially in the night.

It occurred to me, that as Nitrous æther (Sweet nitre) was a well-known sudorific, it might probably act like Dover's powder, as a remedy for sweating, when induced by weakness or disease. I therefore prescribed a mixture containing a few drops to half a pint of water, and was much gratified, on calling two days after, to find that the remedy had been completely successful.

I have since several times prescribed the same medicine in cases of diaphoresis, arising from various morbid causes, and as far as I remember, without a single failure. This novel application of a common domestic medicine leads me to mention that an intelligent lady, a patient of mine, who has become an homœopathist in consequence of my example, has several times relieved attacks of common scrofulous diarrhœa, in herself and daughter (the idea being entirely her own), by taking a drop or two of a solution of Epsom salts diffused in water.

The mention of F. W—'s case also reminds me that when I was a student, an accomplished provincial physician, whose practice I attended, was in the habit of prescribing Dover's powder (a well-known sudorific) as a preventive of the night-sweats of pulmonary consumption, and assured me that he found no medicine so effectual for the purpose. The recollection of this fact, the peculiarity of which indelibly impressed it on my memory, has, I allow, sometimes troubled my conscience a little after declaiming against homœopathy.

ACUTE RHEUMATISM RAPIDLY CUT SHORT BY HOMŒOPATHIC MEDICINES.

CASE XLIII.—*February 18th*, 1859. *Mr. L*.—Been out in heavy rain a few days ago; found him in bed, with hot skin and other feverish symptoms, and complaining of pain in the shoulder, increased on motion.

Tinct. Aconite, Belladonna, and Bryonia, in alternation.

19th.—Pain shifted to left knee and thigh, where also it is increased on motion; fever continues, but skin more moist; has the ordinary symptoms accompanying an invasion of rheumatic fever.

20th.—A most remarkable change; no pain, even on motion.

Omit Aconite and Belladonna.

21st.—Continues free from pain.

23d.—No relapse.

Had no return of the symptoms. I never remember to have seen so rapid a cure in a like case.

All the medicines given in large doses produce fever and heat of skin; and Bryonia causes pains in the joints like those of rheumatism.

MEASLES—CROUP—IMMEDIATE IMPROVEMENT AND RAPID CURE.

CASE XLIV.—*March 16th, 1859. Mr. N—'s child, æt. 2.*—Has been ill for several days, with feverish and catarrhal symptoms. The eruption of measles came out yesterday, and the symptoms of croup have since supervened upon the other disease. Has now (6 p.m.) the characteristic cough and inspiration of croup; burning skin, painful to the hand that touches it; flushed face; rapid, full pulse (120), and the symptoms of inflammatory fever.

Tinct. Aconite, Pulsatilla, and Spongia, in alternation, every $\frac{1}{2}$ hour.

I did not order a warm bath or mustard poultice. If I ordered any adjuvatory treatment, it was a cold wet cloth to the throat, but I have no memorandum to that effect, and do not remember that I did so.

11 p.m.—Decided amelioration in all the symptoms; the cough less rough and barking; the inspiration not so loud nor sibilant; skin moist; pulse softer, and fallen to 100.

So great a change in so short a time is very remarkable, and not according to the natural course of the disease.

17th.—Further improvement.

18th.—Well, with the exception of a non-croupy cough.

No further attendance was needed for this attack, but in about a fortnight afterwards the child's father (who shortly before had been a zealous herbalist) came to me late at night, to tell me the child had another attack, and wishing me to send some medicine. I repeated the Aconite and Spongia, and I was afterwards informed that the parents had sat up to administer the medicine, until the symptoms were completely subdued.

SUBACUTE LARYNGITIS, WITH TONSILLITIS—RAPID CURE.

CASE XLV.—*April 20th. Mr. S—'s servant.*—Sent for late at night. Has been ill about a week; aphonia; pain and tenderness in larynx, so that she cannot bear the least pressure upon the thyroid cartilage; inflamed tonsils and palate; great dysphagia; laborious respiration; frequent attacks of more urgent dyspnoea; rough dry cough; respiratory murmur not heard at all in right lung, and very imperfectly in the left.

Tinct. Spongia, Merc. sol., alternately o. $\frac{1}{2}$ hora.

21st, *Morning.*—No better; respiratory murmur not audible in either lung. Continue medicines in alternation, with Bichromate of Potash (Kali bichromicum).

Evening.—Decided improvement; vocalization returned, though imperfect; difficulty of breathing and swallowing much lessened.

22*d.*—Further improvement; respiratory murmur heard distinctly in both lungs; has fully regained her voice; throat-pain and dyspnoea gone; little tenderness.

23*d.*—Still slight injection of mucous membrane of palate, also tenderness on pressure over thyroid cartilage, and roughness of the voice.

The only adjunctory treatment here was the application of a solution of Nitrate of Silver to the tonsils, and a wet cloth to the throat. A mustard poultice had been applied before I saw her.

25*th.*—Convalescent and about her work.

The Bichromate of Potash appears to have been the curative agent in this case, of which Jahr (op. cit., vol. i, p. 889), gives, amongst the symptoms produced upon the healthy, "pain as of ulceration of the larynx; also insupportable tickling of larynx, causing cough at almost every inspiration." Also, at p. 887—"Uvula and tonsils become red and swelled, and painful; and long-continued blush of the fauces, and soft palate.

BILIO-GASTRIC FEVER.

CASE XLVI.—*March 30th, 1859. Mr. M—'s Son, æt. 9.*—Been ill several days. Hot dry skin; flushed face; pulse 130; loaded tongue; breath very fetid; abdominal pain, with tenderness; headache; occasional delirium; countenance anxious.

Tinct. Aconite, Belladonna, Mercurius.

31*st. Morning.*—A little better.

Evening.—Decided improvement. Pulse 116; skin much cooler; expression of countenance improved; fetor of breath much less; no return of delirium to-day.

*April 2*d.**—Further improvement. No pain in head or abdomen; pulse 108.

4*th.*—Further amelioration of symptoms. Pulse 84. Omit Aconite.

6*th.*—Come down stairs.

8*th.*—Convalescent, but weak, and slightly deaf.

Tinct. Nux vomica.

11*th.*—Discharged cured.

An enema of warm water, for the removal of scybala from the rectum, was ordered once or twice during the attendance.

SEVERE STRAIN CURED BY ARNICA AND BRYONIA.

CASE XLVII.—*August 26th, 1858.—Mr. W—; æt. about 60.*—Severe strain of shoulder about a week ago, when throwing a cricket-ball. Has kept getting worse. Now, pain excruciating, and increased to an unbearable degree on the least motion.

Ordered a warm fomentation, to be followed by the application of Arnica lotion.

Tinct. Bryoniæ o. horâ.

Evening.—Rather easier.

27*th*.—No pain, except on movement of the arm.

28*th*.—Convalescent.

30*th*.—Discharged cured.

PERIODICAL CHRONIC HEADACHE, CURED BY ARSENICUM.

CASE XLVIII.—*August 26th*, 1858. *Elizabeth C—*, *æt.* 22.—Has had a troublesome headache for many weeks; has been taking Belladonna a few days without relief. I ascertained to-day that it was periodical, coming on regularly at the same hour in the evening, and keeping her awake most of the night.

St. Tinct. Arsenici (1), *gt. j* 4*tis* horis.

28*th*—Much better.

30*th*.—Continues better.

I am not certain whether there was any relapse in this case, as she ceased to attend, and left her residence; but the relief produced by the Arsenicum was most striking and immediate.

The dose would be treated by an allopathist with ridicule, although the employment of the remedy in such a case is ground common to the two systems; an instance (as is the use of other specifics) of the unconscious adoption of the homœopathic principle by allopathists.

SEVERE AND EXTENSIVE ULCERATION OF TONSILS AND SOFT PALATE, CURED BY THE BICHLORIDE OF MERCURY.

CASE XLIX.—*January 4th*, 1859.—*Mary Ann T—*, *æt.* 22.—When it was satisfactorily ascertained that Mercury had not been the cause of the disease, *Mercurii bichloridi* was given.

An improvement was observed in a few days, and in about three weeks she was discharged cured.

Dr. Christison mentions a case in which a few grains of calomel caused death by the severe salivation induced, as well as by “ulceration of the throat.”

CHRONIC GLANDULAR INFLAMMATION, CURED BY MERCURIUS SOLUBILIS.

CASE L.—*August 27th*, 1858.—*Mr. H—* applied to me on account of chronic enlargement and inflammation of two inguinal glands.

St. Tinct. Merc. sol. (4), *gt. j* *ter* die.

September 3d.—The swelling of one of the glands entirely gone; the other much lessened.

5*th*.—Swelling of the other gland gone.

I was agreeably surprised at the effect of the medicine in

this case, the dilution being higher than I had ever before prescribed; and it would not have been given on this occasion if I had had by me a lower dilution of the medicine.

This leads me to say, (as I have only occasionally in the cases detailed above mentioned the dilution made use of) that for the first two or three months of my practising homœopathy, I confined myself almost entirely to the first dilution of the centesimal scale. More recently, I have generally used the third dilution of the decimal scale, a drop being the maximum dose, and a small fraction of a drop generally prescribed in chronic cases. My uninitiated readers may be informed that the first centesimal dilution contains in each drop the 100th part of a drop of the mother tincture, and the third decimal being ten times weaker than the last mentioned, or containing one drop of mother tincture in a thousand.

However incredible such a statement may appear to an allopathist,¹ yet I have had a number of cases, chiefly of a chronic character, in which I found the first centesimal too powerful. Thus, in one patient the first dilution of Arsenicum caused giddiness and trembling, and, in several, similar symptoms were caused by a drop of the first centesimal dilution of Belladonna.

A testy old lady was so annoyed by diarrhœa and irritation of the bowels, caused by drop doses of the first centesimal of *Nux vomica*, that she said she would never take any more homœopathic medicines; a resolution, however, which I have induced her to depart from.

I attend also a youth of fourteen, whose bowels are invariably acted upon in a few minutes after taking two pilules, containing together less than a drop of the second centesimal dilution of the same tincture.

I have also had several patients ill of chest-affection, who

¹ I have avoided the use of this word whenever I could do so without circumlocution, because I think it inapt, as not universally descriptive of the practice of the old school, which, as I have before observed, is often unwittingly homœopathic. It would, however, perhaps be difficult to find a substitute.

could not take the 1000th part of a grain of Strychnia without pain and tightness across the chest, or other unpleasant effects following.¹

I have also had several patients who could not take the first centesimal dilution of Phosphorus without the occurrence of medicinal aggravations.²

I have thus, by the cases just referred to and others (see *Appendix*, p. 58), been driven from the *ordinary* use of the lowest dilutions, especially in chronic cases. There is hereby also furnished to my mind a striking confirmation of the truth of what is admitted by Sir John Forbes, and other candid and able writers of the old school, as to the frequent mischief produced by the use of medicines in the ordinary doses.

This reminds me that I had intended to make some remarks on the subject of purgatives. For although there are many cases of drugs, regarded *individually*, which are more potent for mischief, yet, owing to their very general use, both in and out of the profession, there is probably no *class* of medicaments which, on the whole, do so much harm as purgative medicines. The public seems to have imbibed the idea that the only way in which medicine can operate beneficially at all is by producing an evacuation of some sort; so that medicine or physic is by many used as a phrase equivalent in its meaning to *purgative* medicine. Medical men seem also to suppose that a case cannot go on well unless the bowels are acted upon at least once a day, and I consider it not the least advantage I have gained from homœopathy, that I have learned that it is not necessary to be continually putting questions about the bowels of my patients, or teasing them with aperients.

Two cases especially have recently come under my observation which have forcibly impressed me with the mischief

¹ Dr. Pereira ('*Materia Medica*,' p. 920) recommends his readers to begin the use of Strychnia with doses of 1-16th to 1-20th of a grain, and gradually to increase it!

² A medical friend assures me that a lady, a patient of his, cannot take Tartar emetic, and some other medicines, in a very much higher state of dilution than any referred to above, without the most serious symptoms following, but this is evidently a case of idiosyncrasy.

that is often done in this way ; and I can remember various others which have occurred in years past, though when we have come to consider anything as a *necessary* evil we are very apt to overlook altogether its injurious consequences.

In one of these recent cases, a patient, who was recovering well from her accouchement, got the idea that her bowels wanted "regulating," and therefore, without acquainting me, took an ordinary dose of "salts and senna." This operated violently, and excruciating pain, which continued several days and finally resulted in the formation of an abscess, was the consequence. Thus her convalescence was delayed many weeks, and she was the self-tortured victim of an erroneous idea.

The other case was that of an aged person labouring under an attack of acute bronchitis. Some improvement in her symptoms seemed to follow the incipient treatment, but the medical attendant, acting according to the idea to which I have just referred, prescribed some aperient medicine, which, although mild compared with what is often given by allopathists, acted powerfully on the bowels, and the vital powers, already impaired by the disease, rapidly gave way, and any hopes of recovery (feeble though they might be), which had been excited by the amelioration of the symptoms, were blighted.

To prescribe aperients, however, as part of a course of routine treatment, or with the idea of correcting constipation *as a morbid state*, is, I think, a very different thing from removing a source of irritation, whether it be the product of a diseased condition, or a foreign body introduced from without. The occasional exhibition of a very mild aperient, or, still better, the use of water as a gentle stimulus to the loaded intestine, is, in my opinion, perfectly compatible with the homœopathic method of treating *disease as such*. I am not aware, however, that, out of the fifty cases which have been above referred to, I *prescribed* anything of the sort, except in one or two, although I have occasionally yielded to the solicitations of the patient or his friends, when uneasy about the matter, and consented to the use of an enema, or a small dose of castor oil, but nothing more than this. I

know, however, I shall be criticised even for this by some of my brethren of the old school, for a few of them, first themselves lay down a rule as to what is homœopathic consistency, and then find fault with us for not conforming to it.

The cases which I have above detailed, form but a fraction of those which I have successfully treated on the homœopathic principle, and which now amount to about nine hundred. And though I do not mean to imply that all are equally striking with some of those which have been referred to, yet there are many that I have kept back which might be placed on a par with a large proportion of those which are recorded. And although my former practice was very mild compared with that of many practitioners of the old school, and more nearly approached the expectant than the heroic, so that nature (so to speak) was generally allowed "fair play," yet I can truly say that since my taking the homœopathic principle for my guide in the selection of remedies, the success of my treatment has been incomparably greater than ever it was before.

In speaking thus I am very far from believing that homœopathy is an universal panacea for "the ills that flesh is heir to." I believe that no *human* instrumentality will ever subvert the "reign of death." None can do this but He who has purchased the power to do so by the surrender of His own life. When any one, therefore, whether homœopathist or not, tells me that "all his cases have been successful," even in reference to one class of serious diseases, I can only pity his ignorance or want of candour.

Patients and their friends, under the old system of medicine, and I dare say also under the new (although I have as yet had no experience in the matter), are often very unreasonable in this respect, attributing every death to the ignorance or negligence of the physician; forgetting that "death has passed upon all men, for that all have sinned." It is, however, not less incumbent upon the Christian (I use this word in the New Testament sense), in this as in other human affairs, to seek to discover and use the best instrumentality within his reach. He thus becomes part of

the channel (however small and insignificant a part it may be) in which divine mercy flows, which is the only way in which man can become an instrument used by God, whether in regard to spiritual or natural things.

I consider, as I have before stated, that the cases which I have above described fairly represent the great bulk of those which I have treated homœopathically. As I have just said that I am very far from claiming for homœopathy universal success, it would answer no purpose to refer to *fatal* cases. There are many homœopathic works, however, which contain an account of the comparative results of the two systems of treatment on a large scale.¹

I would, however, before concluding, refer to what is my own judgment of the comparative efficacy of the two systems, as tested by my own experience, alluding to the cases which have been detailed in illustration.

I. A large proportion of the cases which I have treated homœopathically are of a class which are frequently cured by judicious practitioners under the old system, but which I have found are more agreeably, more rapidly, more certainly, and more completely cured by the new.

Under this head I should include the cases numbered 3, 4, 5, 6, 9, 10, 11, 12, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 30, 38, 42, 43, 44, 45, 46, 47, 49, 50.

It is very probable, however, that several of the above would have died if they had not been treated homœopathically. I refer especially to cases No. 14, 27, and 8.

II. Under this head I should include cases which, if left to nature, generally run a certain definite course, and of which a considerable proportion would recover, which are often cut short by homœopathy, but which the old system

¹ Any of my readers who wish to examine into this question, and others connected with homœopathy, I would refer to the very able tracts of Dr. Sharp, the perusal of which has been a material aid in the removal of many of the difficulties which lay in the way of my adoption of the homœopathic law as a general principle, especially those difficulties which the discoverer of that law has himself placed in the path of the sober-minded inquirer.

has no medicines to touch, although a judicious attention to diet and regimen may often moderate the symptoms. As illustrations I should refer to the cases numbered 2, 28, 29, 33, and 34.

III. Serious cases, but not immediately dangerous to life, which, if left to themselves, continue for an indefinite period, which are often rapidly cured by the new system, but which allopathy has no medicinal agents on which an experienced physician would place the least reliance, although moral or dietical treatment (common to the two systems) may in some measure aid the recovery. As illustrations, refer to cases No. 1, 7, 8, 31, 32.

IV. Cases which, if left to themselves, are rapidly and almost certainly fatal, which homœopathy often cures, but to act beneficially on which the old system is utterly without resource. As examples, I would select cases No. 13, 35, 36, 37, and 41.

V. Cases the principle of the treatment of which, by an enlightened practitioner of the old school, would be homœopathic, the remedy not having been borrowed from homœopathic authors. Case No. 48 furnishes an undoubted illustration of this class.

In this estimate of the comparative value of the two systems, I have said nothing of the mischief often done to the constitution by the treatment, even when the disease is cured. Neither have I referred to the value of remedies of which the administration in the case of children produces no struggles or excitement, and which can be easily swallowed, even when the throat is diseased, and often retained though vomiting be a symptom of the complaint. Nor, except what is implied in my remarks on the unnecessary employment of purgatives, have I referred to the way in which the patient is often to the last tortured, "*selon les règles*," even in cases destined after all to prove fatal.

To my medical readers I would say, in conclusion, that nothing could be easier than to verify or disprove the great bulk of my observations for themselves, nor anything more difficult than to find an hypothesis to explain them, if the

Hahnemannian one be rejected. Until, however, the zealots of the old school have done either the one or the other with these and similar facts, it would certainly be wiser in them to cease to arrogate to their own system the exclusive claim of "science and legitimacy," or, at all events, no longer to apply the terms "quackery and imposture" to one which courts examination, and, being founded not on routine and precedent, but being simply a generalization of observed *facts*, has nothing to fear from *true science*, and can only gain from the most critical investigation.

APPENDIX.

The following correspondence, and abridged newspaper reports of the meetings of the Sheffield Board of Guardians, will give an account of the steps which led to my enforced resignation of my office of Union Medical Officer, an office which I had in two districts of the Union held altogether for eleven years.

I should probably not have thought these matters worth republishing, if I had not been recommended to do so by several medical friends.

My first announcement of my change of views on the subject of therapeutics was made to the Poor-law Board in the following letter:

“ TO THE POOR-LAW BOARD.

“ SHEFFIELD, *Oct. 6th*, 1858.

“ GENTLEMEN,—I think it due to you to intimate that during the last few months an important change has taken place in my views as to what is the most efficient method of treating disease, and a corresponding change in my practice, or that, in short, I have become an homœopathist. This change has been mainly due to the unlooked-for results of a trial I have been making of the homœopathic mode of treatment for several months back, both on my parish and private patients.

“ As to my future line of practice, I may state that if, in any case, homœopathy, according to my knowledge of its resources, did not yield a remedy adequate to the requirements of the case in hand, I should undoubtedly resort to one which I had found available in the practice of the old school.

“ If, however, you consider the practice of homœopathy (except in the rare and exceptional cases above alluded to), incompatible with the due discharge of the duties of the office of a District Union Surgeon, I am prepared at your request to resign my charge.

“ I would add, in conclusion, that if allowed to retain the appointment, I am prepared to intimate to the Guardians, that I am willing to supply a considerable part of the medicines from my own surgery, without charge to the Union; as, indeed, without their knowledge I have done during the period of my investigation of the subject.

“ I am, Gentlemen,

“ Yours respectfully,

“ J. H. SMITH.”

A copy of the above letter was sent to the Guardians, and read at their next meeting, when a resolution was passed to the effect that it be submitted to the Poor-law Board, with a request for their views thereupon.

The following is the letter of the Poor-law Board, addressed to the Guardians in reference to my communication; and the remarks of the Guardians at their next meeting—abridged from the Sheffield 'Daily Telegraph':

"POOR-LAW BOARD, WHITEHALL, S.W.,
"24th November, 1858.

"SIR,—I am directed by the Poor-law Board to acknowledge the receipt of your letter of the 7th ult., in which you enclose a copy of a letter which has been addressed to the Guardians of the Sheffield Union by Mr. John Harman Smith, one of the medical officers of the Union, from which it appears that he has adopted the practice of homœopathy in the treatment of the sick poor in his district, and you request to be furnished with the Board's directions on the matter.

"I am directed to inform the Guardians that the Board have received a letter from Mr. Smith on the subject, in which he states as follows: 'If in any case homœopathy, according to my knowledge of its resources, did not yield a remedy adequate to the requirements of the case in hand, I should undoubtedly resort to one which I had found available in the practice of the old school.' Having regard to this assurance, the Board do not feel that it is necessary to require Mr. Smith to resign his office of medical officer, provided the Guardians are fully satisfied with the manner in which he discharges the duties of his office, and his general treatment of the sick poor under his care.

"I am, Sir, your obedient servant.

"COURTENAY."

"To Joseph Spencer, Esq., Clerk to the Guardians of the Sheffield Union."

The Chairman said he supposed they must adopt the letter of the Poor-law Commissioners; but there was one strong objection to it. Some persons had an objection to homœopathy, and he did not think it right to force it on the poor. They were differently situated to others, because they were obliged to have what was given them. There was another objection, too, and that was supposing there were to be a very bad case in which the surgeons required a consultation, would other medical men agree to consult with Dr. Smith? (Hear, hear.)

Dr. Shearman, as a friend of Mr. Smith, was sure that gentleman was perfectly honest in his belief in homœopathy, and that he would do his utmost in the discharge of his duties. There were, however, cases in which he (Dr. Shearman) did not believe homœopathy would answer. He would put an imaginary case of typhoid fever, which required stimulating treatment from the very first. Homœopathy certainly could not afford those stimulants which the case required.

Mr. Bussey and Mr. Watkinson both objected to experimenting on the poor.

Dr. Flory, although not a medical man, had given some attention to the subject, and believed that in acute cases homœopathy was a nonentity. One might just as well give a patient a drop of water as an homœopathist's infinitesimal dose. He considered homœopathy a mere burlesque. It might do some good in a case of catarrh or slight sickness, but for such a case as typhus it was useless.

The Chairman said, if homœopathy would do, it would save them £900 a year for medicine, for Mr. Smith found his own. (Laughter.)

Dr. Shearman said, if homœopathy were followed he believed that the slight cases would get to be serious ones, and that instead of costing £900 it would cost £2000 for medicine.

Mr. Watkinson proposed that the new sick treatment does not meet with the approbation of the Board.

On the suggestion of the Chairman, however, the matter was adjourned till next week.

The abridged report of the adjourned meeting is as follows :

After the routine business of the Board had been disposed of,

The Clerk read a long letter from Mr. J. Harmar Smith, one of the medical officers of the Union, from which we make the following extracts :

209, GLOSSOP ROAD, Dec. 8th, 1858.

"GENTLEMEN,—I write in consequence of the remarks which were made at the Board last week, to correct some misapprehensions and mistakes, both in regard to my former letter to the Board, and also as to the system of therapeutics which I have adopted. First, I would state that I have no intention in the future (any more than I have done in the past) of trying experiments on the poor. The part of my letter which leaves it open for me in any case where homœopathy might fail, to resort to allopathy, has been completely misunderstood by the Guardians. It may be owing (in part at least) to a want of perspicuity in my mode of expressing myself, though I should have thought the expression, '*in any rare and exceptional case,*' would have made it clear that I had no intention of resorting first to one system and then to the other, or, in other words, experimenting upon the poor. My reason, however, for introducing the objectionable clause was the following: I was aware that the practice of homœopathists was watched with a jealous and an evil eye by many of their professional brethren, (although, personally, I have met with the most courteous behaviour from nearly all of my former medical friends). Taking cognizance also of the fact that no human system is perfect, and that, therefore, I could not expect to be able to dispense entirely with ordinary remedies, especially in the outset of my career as a homœopathist, I was determined to guard myself from the possibility of a charge of dishonesty, if I should in any case find myself obliged to yield to this necessity. I might, however, have omitted this proviso, for during the five months that I have exclusively practised homœopathy, I do not remember that I have in more than two parish cases, out of the many hundreds I have treated, voluntarily substituted allopathic for homœopathic remedies; nor in a single instance, in private medical practice, have I for three or four months back done so. I may add, however, that from my first adoption of homœopathy, I have intended (seeing that parish patients cannot always choose their medical man) never to force homœopathy upon them; but if any objection were made to it, to treat them, so far as there was any possibility of doing so, according to the old plan. I have, however, been surprised to find so few objections made to colourless and generally nearly tasteless medicines. Indeed, I can only account, by the felt efficacy of the remedies, for the fact that in only two cases has any objection been made to them by pauper patients. In these cases the objection, I found, was not to homœopathy, but to medicines which looked and tasted very much like water; for so profound is the popular ignorance of chemistry and pharmacy that water, if it be coloured or thickened, although possessing no medicinal property whatever, will be better received than the most powerful medicines not possessing any striking sensible qualities; unless, indeed, some very rapid remedial result follow their administration.

"The assertion that 'homœopathy cannot afford the stimulants needful in the treatment of fever,' is incorrect. Homœopathy only forbids the *indiscriminate* use of the alcoholic stimulants in the treatment of disease; they are strictly homœopathic to certain varieties of fever, and affections of the nervous system.

"In answer to Dr. Flory's remarks, I beg to observe that the stronghold of homœopathy is the treatment of *acute* diseases, and they are incomparably less likely when thus treated to run into a chronic form. My conversion to homœopathy has been entirely due to witnessing its marvellous effects in the treatment of acute disease. It has been proved by statistics on a large scale that the recoveries in all diseases, acute and chronic, are as three to one under homœopathic

compared with allopathic treatment' * * *. I would remind the Board that I have been nearly twenty years in practice, and more than half that period a medical officer of the Sheffield Union, during six years of which my district included what is now divided into the north and north-west. I have thus had a great deal of experience in the treatment of disease, and should not be likely to have come to a hasty conclusion. I purpose, gentlemen, in a few weeks, to address to you a pamphlet, entering more fully into particulars as to my views, and describing more particularly the cases to which I have alluded, and many others; and all I now ask is, that you will postpone coming to a conclusion in this matter until then.

"I am, Gentlemen,

"Yours respectfully,

"J. H. SMITH."

The Chairman said, with regard to the system of homœopathy, the Guardians had nothing to do with it. If they had the power of giving the paupers tickets to go where they liked for medical assistance the case would be different, and they could then give all systems a chance; but this was not so. The Guardians had to provide a medical officer in four districts. Mr. Smith had one of the districts, and if they allowed him to pursue the system he wished, they would be giving one district a system of homœopathy, which they perhaps would not like. The Poor-law Board, by their letter read last week, had given the Guardians the power of using their own judgment in the matter, but would it be right to allow a large section of paupers to be placed under a system which they did not approve. Mr. Smith, before he decided upon this, ought to have come to the Board.

Mr. Watkinson said he would move the following resolution: "That the Board, while acknowledging that Mr. Smith had acted with kindness and attention to the sick poor in his district, the Guardians cannot make themselves responsible for any deviation from the practice in operation when he was appointed, and that a copy of this resolution be forwarded to the Poor-law Board, with a request that they will favour the Guardians with their further views thereon."

Mr. Pell seconded the motion.

Mr. Chapman thought that, from the letter of the Poor-law Board, their objections against homœopathy were not so strong as here. With respect to the adoption of the system, he had not much to say, for he believed many objections which were urged against homœopathy might also be urged against the other system. He should be very glad if Mr. Smith could be allowed to pursue the practice for a short time, and let the Guardians see how he succeeded. He saw nothing to risk, especially in the hands of an experienced gentleman like Mr. Smith.

Mr. Hutchinson did not think a Union workhouse was the proper place for Mr. Smith to try experiments. The system might be right, or it might not. He blamed Mr. Smith for experimenting in the Union. He could not support the motion unless it went a little further, and asked Mr. Smith to resign.

The Chairman begged to suggest the following motion: "That the Board, whilst acknowledging that Mr. J. H. Smith has acted with proper kindness and attention to the poor within the district to which he was appointed, cannot make themselves responsible for any deviation from the practice in operation when he was appointed, and therefore call upon Mr. Smith to either practise, as far as this district is concerned, upon the old system, or to at once resign his appointment."

Mr. Watkinson and Mr. Pell having adopted this motion as more satisfactory to the Guardians than the original, it was put to the meeting and carried.

The following is my answer to the request of the Guardians, that I should resign; and the report of their proceedings thereupon, in the 'Sheffield Times:'

'The part of the letter which has been omitted, included a reference to several of the cases which have been described in the body of the pamphlet.

" 209, GLOSSOP ROAD, Dec. 15th, 1858.

" *To the Board of Guardians of the Sheffield Union.*

" GENTLEMEN,—I beg to acknowledge the receipt of a copy of your resolution of last week, in reference to the line of medical practice that I have adopted in my parochial district.

" I am obliged for the acknowledgment that I have acted with 'proper kindness and attention to the sick poor,' or, in other words, that my *general* treatment of the sick poor has been satisfactory to you.

" I feel bound, however, respectfully to decline to accede to the request, 'either to practise, as far as the district is concerned, upon the old system, or at once resign the appointment.'

" I feel persuaded that it would be greatly to the injury of my patients if I were to lay aside the practice of homœopathy, and therefore cannot conscientiously do so, except under the special circumstances to which I have before referred. I have reason also to believe that the new treatment is highly satisfactory to the patients themselves in general.

" I gave no pledge to the Board who appointed me, as to the line of practice which I meant to pursue. I did not promise never to deviate from the routine practice of medicine, and therefore do not feel called upon to resign my appointment.

" I had, it is true, a question whether the practice of homœopathy, although not directly forbidden by the Poor Law, was in accordance with its intention and spirit; and, therefore, on becoming convinced of the truth of the principle, *similia similibus curentur*, and having fully adopted it as my guide in practice, I at once referred the matter to the Poor-law Board, the authorised expositors of the new Poor Law.

" Their decision, I believe, settled the question as to the legality of the parochial practice of homœopathy, and I should judge, therefore, removes the responsibility from the Guardians of the results of the practice *as such*.

" On these grounds I must decline to do anything to nullify the decision of the Poor-law Board.

" I am, Gentlemen, yours respectfully,

" J. H. SMITH."

The Chairman said there was this difficulty respecting Mr. Smith's position. He was himself a homœopathist; but the substitute whom he had appointed to act in his absence was an allopathist. He had reason to believe that the system of homœopathy would not be so cheap to the Union as had been stated. It appeared that, though the medicine required would be small in quantity, the brandy and wines for which certificates had been given were excessive. There was one case of a man named John Mills, an elderly man, who was, with his wife, under the care of Mr. Smith. This couple were in the receipt of 6s. a week, and Mr. Smith had made an order for 3½ lbs. of meat and a pint of porter daily!—(laughter)—equal to 3s. 9d. per week. Thus this couple were receiving 9s. 9d. per week under the homœopathic treatment. He thought that 1500 paupers ought not to be placed under homœopathic treatment, while in the rest of the Union the allopathic system was continued. He would move the following resolution:

" Resolved,—That the resolution of the Board of the 8th December with respect to the practice of homœopathy, also Mr. J. H. Smith's letter now read in reply, together with the following resolution, be forwarded to the Poor-law Board:

¹ The quantity of meat ordered in the above case was ½ lb., and not 3½ lbs., per diem. The case was one of diabetes, in which practitioners of both schools concur in recommending an animal diet.

"That whilst the Guardians fully appreciate the zeal exercised by Mr. J. H. Smith in the performance of his duties, they cannot take upon themselves the responsibility of allowing him to experimentalize upon the sick paupers included in his district. The Guardians, therefore, request the Poor-law Board to require from Mr. Smith the resignation of his appointment.'"

Mr. Pell seconded the motion, but said he was bound to state that those paupers who had come under his own notice *had unlimited confidence in Mr. Smith and his system of treatment.*

The Chairman—And the brandy.

The motion was carried.

The meeting at which the resolution, requesting the Poor-law Board to require my resignation, was passed, was held on December 15th. I received the following letter from the Poor-law Board on January 26th.

"POOR-LAW BOARD, WHITEHALL, S.W.

"25th January, 1859.

"SIR,—I am directed by the Poor-law Board to inform you that they have received from the Guardians of the Sheffield Union a copy of the following resolution, which has been passed by them with respect to your treating the sick poor in the district of which you are a medical officer, homœopathically:

"Resolved,—That this Board, whilst acknowledging that Mr. J. H. Smith has acted with proper kindness and attention to the sick poor within the district to which he was appointed, cannot make themselves responsible for any deviation from the practice in operation when he was appointed, and therefore call upon Mr. Smith to either practise, as far as the district is concerned, upon the old system, or at once resign his appointment.'

"The Board desire me to remind you that in the letter which they addressed to the Guardians on the 24th November last, they stated that, having regard to the assurance contained in your letter of the 6th of October, they were not prepared to require your resignation, provided that the Guardians were fully satisfied with the manner in which you discharged the duties of your office, and the general treatment of the sick poor under your care. It now appears, however, that from your having adopted a system of medical treatment which is not recognised by any of the constituted medical authorities of the country, the Guardians have no longer confidence in your proceedings as medical officer. It is to be borne in mind, too, that the Guardians are primarily responsible for the medical attendance on the sick poor, and the Board therefore think that as you were appointed by them on the understanding that you would practise in accordance with the system generally recognised, the Guardians are entitled to demand either that you should adhere to that system, or resign your office of medical officer. Under these circumstances, the Board are not prepared to assume, themselves, the responsibility of allowing you to retain the office, unless they are informed that you will relinquish the practice of homœopathy in the treatment of the poor under your care as medical officer; and I am accordingly to inquire whether you are willing to give such an assurance?

"I am, Sir,

"Your obedient servant,

"W. G. LUMLEY.

"Assistant Secretary.

"To J. H. Smith, Esq., Medical Officer of the
Sheffield Union, Sheffield."

The following is my reply to the second letter of the Poor-law Board, and an account of the proceedings of the Guardians on receiving a copy thereof:

"209, GLOSSOP ROAD, SHEFFIELD,
Feb. 4th. 1859.

"MY LORDS AND GENTLEMEN,—I beg to acknowledge the receipt of yours of the 25th ult.

"You must allow me to say that its contents much surprised me, after what you said in your letter to the Guardians of the 24th of Nov., of which you favoured me with a copy. You stated therein, in the passage which you quote in your last, that you did not feel it necessary to require me to resign my office, 'provided the Guardians were fully satisfied with the manner in which I discharged the duties of my office, and with my general treatment of the sick poor under my care.' Now, surely, the plain and obvious meaning of this language is that you did not judge it necessary to require my resignation, unless the Guardians had other grounds of complaint against me than the fact as to which I had borne witness myself—viz., that I had become an homœopathist; and thus a straightforward interpretation of your words would imply that you did not lay upon Boards of Guardians (often certainly very incompetent to decide on such matters, whatever may be the case in the present instance) the responsibility of deciding on the truth or falsehood of conflicting medical systems.

"That they had no grounds of complaint against me, apart from my having become an homœopathist, is expressed in their resolution transmitted to you, in which it is stated that I had '*acted with proper kindness and attention to the sick poor,*' and '*that they fully appreciated the zeal exercised by me in the discharge of my duties.*' It appears also from the report of the Guardians' meeting of the 15th of December last, that the very Guardian who seconded the resolution for my dismissal, in doing so, said, '*that he was bound to state that those paupers who had come under his own notice had unlimited confidence in me and my system of treatment.*' It seems indeed remarkable that a body of persons so anxious to get rid of me on account of the medical system which I had embraced, should, in the face of your letter, express so strongly their 'satisfaction with the way in which I had discharged the duties of my office and with my general treatment of the sick poor under my care.' The only remarks reported in the newspapers as having been made at any of the meetings of the Guardians, in the least reflecting on the manner in which I have discharged the duties of my office (apart from the homœopathic question), were some observations of the chairman at the meeting just referred to, to the effect that since my adoption of homœopathy I had ordered an excessive quantity of extras, especially brandy and wine. I do not know whether these remarks have reached and had an unfavorable influence upon you, but I feel assured that if you had caused inquiry to be instituted, you would have found that they had been made on insufficient evidence. I am persuaded that I have not ordered more extras, since my adoption of homœopathy, than previously; and the extras I have ordered have consisted chiefly of meat, and comparatively little of brandy, wine, or porter. I have not the means of making an exact calculation, but I do not think that in the four months which have now elapsed since my avowal of homœopathy, the alcoholic stimulants I have prescribed have cost the Union two pounds. I have ordered, or rather recommended, extra diet ever since I was a medical officer, more than, I believe, is the general practice amongst my colleagues; because I have been all along convinced, that the scale of relief ordinarily allowed to the sick poor is utterly inadequate. Many of them, when they first come under the notice of the medical officer, are suffering from diseases induced by starvation; and convalescence, in a much larger number of cases, is protracted, and recovery retarded, by inability to procure a sufficient quantity of food suited to their condition.

"The only antidote, to this state of matters at present existing is in the discretion allowed to the medical officer to recommend extra diet in cases where he considers it to be especially needed; a discretion, however, which has to be exercised with great caution and reserve.

"And as the president of your honorable Board has asked the opinion of medical officers on the subject of the proposed alteration in the law, I will take this opportunity of saying (and my opinion as that of one who has seen eleven years of Poor-law medical service should, I think, have some weight, especially in a matter wherein I can have no personal interest to serve), that in any modification of the law bearing on this matter the power of the medical officer should be increased rather than diminished, and the exercise of his duty in this respect be placed beyond the control of relief committees and relieving officers. Any additional expense to the Unions thus incurred might, I believe, be easily provided for by increased vigilance in the reception of applications for relief.

"In answer to the question with which your letter concludes, I feel compelled to decline 'to give an assurance that I will relinquish the practice of homœopathy in the treatment of the poor under my care as a medical officer.' To give such a pledge, in the full extent of its meaning, would involve the laying aside of many of the most valuable remedies of the old school. With my present views, however, if compelled to relinquish the *general* use of homœopathic remedies, I should certainly give up the practice of medicine altogether. Where matters so important as life and health are in question, I feel that I am responsible to a higher than any human authority, to do what I believe shall most conduce to the preservation of the one and the restoration of the other.

"In conclusion, I would observe that I have never, since I became a medical practitioner nineteen years ago, been nearly so successful in my practice as since my adoption of homœopathy, nor since I became a medical officer so often received the thanks of my parish patients on account of their restoration to health. I therefore firmly believe that my continued retention of the office would be an advantage, and not an injury, to them.

"If, however, you require me to resign my office, I am prepared to do so, according to the promise of my former letter; although I think I have shown that yours of the 24th of November warranted the expectation, on the part of myself and friends, that no such demand would be made.

"I am, my Lords and Gentlemen,

"Yours respectfully,

"J. H. SMITH,

"Medical Officer of the South District of the
Sheffield Union.

"To the Poor-law Board."

The Chairman said, it was evident Mr. Smith was endeavouring to gain time, and induce the Poor-law Board to reconsider the decision they had previously given in the case. They, as Guardians, had however the health of the poor to look to, and they should act with determination. They had never expressed any satisfaction with Mr. Smith's homœopathic system, and he would therefore propose that a resolution to the following effect be sent to the Poor-law Board: "A copy of a letter, addressed by Mr. J. H. Smith, District Medical Officer, to the Poor-law Board, having been read to the Guardians, resolved—That believing Mr. J. H. Smith to be attentive and considerate in the performance of his duties, the Guardians have hitherto, from kindly motives, refrained from taking any extreme steps, and that without regard to the comparative merits of the homœopathic or allopathic systems of medicine, the Guardians cannot but feel the responsibility resting upon them in continuing to force upon the sick poor a method of treatment not generally recognised or confided in; and they, therefore, earnestly but respectfully request the Poor-law Board to take such steps as will insure Mr. Smith's immediate vacation of office.

Mr. Bussey seconded the motion, Mr. Hutchinson supported it, and it was carried unanimously.

I immediately received the following reply to my second letter to the Poor-law Board, according to the request of which I felt that there was no alternative but my at once acting.

"POOR-LAW BOARD, WHITEHALL, S. W.,
10th February, 1859.

"SIR,—I am directed by the Poor-law Board to acknowledge the receipt on the 7th instant of your letter, dated the 4th instant, in reply to the communication which they addressed to you on the 25th ult., in reference to your adoption of the practice of homœopathy in the treatment of the sick poor under your care as a medical officer of the Sheffield Union.

"The Board have already intimated to you that as the Guardians have expressed an unanimous want of confidence in your 'general treatment,' which necessarily includes your system of medical practice, the Board feel precluded from accepting a responsibility which the Guardians repudiate. It will, however, be highly satisfactory to the Board, and, they doubt not, to the Guardians also, if, upon further consideration, you should feel yourself justified in resorting to the medical treatment which you formerly practised, and which alone has the assent of the medical profession generally.

"If you feel yourself unable to adopt this course, the Board have no alternative but, with regret, to request you at once to tender your resignation to the Guardians.

"I am, Sir, your obedient servant,

"COURTENAY, *Secretary*.

"To J. H. Smith, Esq., Medical Officer of the Sheffield Union, Sheffield."

The form of my resignation was as follows. The Guardians acted more kindly than their previous conduct in the affair had led me to expect, and allowed me to retain the office for a month after my resignation.

"209, GLOSSOP ROAD, Feb. 16th, 1859.

"GENTLEMEN,—I enclose a copy of the reply of the Poor-law Board to my letter to them laid before you last week.

"The clear and definite decision which the Board (in Poor-law matters the representative of Government) has at length given, I feel materially alters the aspect of the case.

"I cannot conscientiously cease to avail myself of the invaluable guidance which the homœopathic law affords in the choice of remedies in parish any more than in private practice.

"On the other hand, I should not feel at liberty to refuse to comply with the requirements of the Poor-law Board, either 'to gain time' or for any other reason, even if I had not given them a pledge on the subject. The obedience which I hold to be due to 'the powers that be' would still leave me no option in the matter.

"I therefore beg to 'tender my resignation,' only requesting you to signify the day on which my duties as medical officer are to terminate.

"I am, Gentlemen, yours respectfully,

"J. H. SMITH,

"Medical Officer of the South District of the Sheffield Union.

"To the Guardians of the Sheffield Union."

I think any impartial person, reading the above correspondence, must see that the Poor-law Board in their later letters contradicted their first.

Their present relation to homœopathy appears to be, that if the Guardians are satisfied with a medical officer, they (the Poor-law Board) will not raise an objection on the score of homœopathy, although they will not take the responsibility of retaining an officer when objected to by the Guardians on this ground.

This is an advance on the state of matters which obtained some years ago. Thus, in 1843, Mr. Newman was removed by the then Poor-law Board from the Wells Union, although both the Guardians and paupers¹ were anxious for him to retain the office.

More recently, Mr. E. C. Holland, of Honiton, where also the Guardians were favorable to his retention of his appointment, was only allowed to do so by the Poor-law Board on conditions which were evidently very distasteful to him, viz., that he would only practice homœopathically when it was not objected to by the paupers.

Although I voluntarily assured the Guardians that it was my intention to act on a similar plan in treating the poor, yet I never made, or was required to make, such an arrangement with the Poor-law Board, and should, humanly speaking, have been still in the parochial harness, but for the resolute interference of the Guardians.

Dr. Brereton (late of Bradford) states in a letter to the 'Sheffield Independent,' dated December 28th, 1858, that he and another gentleman, whom he knew, had been elected to and allowed to retain Union appointments, although professing and practising homœopathy. I find also by the April number of the 'British Journal of Homœopathy' (page 342), that the Toxteth Board of Guardians advertised for a medical officer in the *Homœopathic journals*, which would seem to prove that they are aware that the Poor-law Board will not cancel the appointment of a homœopathist, if agreeable to the Guardians.

¹ If the poor people receiving relief had been able to adjudicate in the matter in the present instance, there is no question how it would have terminated. I have been very thankful for the unanimous expressions of deep regret (in some cases accompanied with tears) that have met me whenever I visited them, after the decision which had been arrived at at head quarters became known.

There is another matter, in itself of very small consequence, about which I would say a few words, because I consider it of importance as illustrating a principle.

I was a member of the 'Sheffield Medico-Chirurgical Book Society' at the period of my avowal of homœopathy, a society for membership in which the only qualification required by the rules is a legal title to practice. Although I thought the wish for my exclusion was unreasonable, yet learning that a motion was pending to break up the society in order to get rid of me, and not wishing to put the members to trouble and expense on my account, at the suggestion of one of the officers, I sent in a letter offering to resign if requested to do so by the same majority of the members as was essential to carry other motions. Instead, however, of this being accepted, the following resolution was proposed and carried :

"That inasmuch as this society cannot professionally recognise any gentleman who is practising not according to the rules of legitimate medicine, the secretary be directed to remove from the list of members the name of Mr. Harmar Smith, for the reason, that that gentleman has adopted the practice of homœopathy, and that he direct those whom it is necessary to do, to send no more of the society's books to that gentleman."

Thus the rules and constitution of the society were set at nought, apparently for no other end than to exclude me in the most offensive manner.

My principle object in now referring to the matter is to inquire what can be the motives actuating such a line of proceeding. I have no reason to believe that it is personal dislike, or jealousy, or any motive of the kind ; and I have had the direct assurance of several medical friends, that as far as their observation had gone, no member of the profession had called in question my honesty and sincerity in the step I had taken.

I believe the reason is the same as that which has induced some of my former medical friends, whom I also would entirely acquit of any personal antagonism, to give me the "cut," and others to treat me with unwonted shyness and distance.

There are, no doubt, individuals who are jealous of the success of homœopathy ; there are others who really believe that it is, as they often say, a system of imposture and charlatanry ; there are some who have publicly pledged themselves against it, and feel obliged in consistency to maintain their position ; and there are a large number who, without inquiry, follow in the track of their leaders ; but no word I think so aptly designates the principle which binds the profession together against the nearest approximation to the truth in the art of healing which has ever yet been made, as conventionalism—the principle which in another form causes a gentleman in the higher grades of society to be branded as a coward, if he declines a challenge to fight a duel.

This principle takes the form of a tacit understanding, in the present instance, that a foe has entered the camp of *Æsculapius* which must be turned out, so that some of the writers in the journals have, by a profane perversion of Scripture language, indeed, described homœopathy as "an unclean thing," with which no fellowship must be kept ; while the editor of the '*Lancet*' has gone a step further (see, for instance, the number for September 11th, 1858), and labours, by mystifying a circumstance which occurred a while before at Plymouth, to give his readers the impression that there is a connexion between homœopathy and Mormonism.

Thus these writers seek to bring a moral element into the question, or to introduce (as I have hinted is done in other departments of human society) a morality which has no sanction in the Word of God. This leads me to express, and I feel bound to do so in concluding this public testimony to the value of homœopathy as a system of therapeutics, that whilst disgusted with such efforts as I have described to cast the odium of immorality upon it, yet that I have, on

the other hand, no sympathy with any attempts to give it the prestige of a moral movement; and have been exceedingly pained to observe a tendency in a few homœopathic writers to misapply and pervert the language of Scripture in order to give it this prestige. This conduct appears to me to be characterised by folly as well as by impiety, since the effect of it upon those who "tremble at the Word of God," and who are ignorant of the merits of homœopathy, will be to lead them to suppose that a system which needs such extrinsic support cannot be based in truth.

Let it be kept in its proper place as an immensely improved remedial system, mercifully designed as a means of mitigating man's temporal woes and lengthening human life, and it will be much more likely to be accepted by the wise and good, if allowed thus to stand on its own foundation, than if there be an attempt to widen that foundation by stones taken from a building of God's own handiwork, and consecrated to higher and more enduring ends.

Note to p. 28.

The following "provings" of Stramonium are from Hempel's translation of 'Hahnemann's *Materia Medica Pura*,' Vol. IV., Article "*Datura Stramonium*:"—"The eyes stare—the whole face looks wild and frightful. * * Sleepless. * * Strange fancies, loquacious delirium. * * Frightful fancies—the features show fright and terror. * * Sadness. His imagination is confused, and is disturbed with fear."

No language could describe, with more minute accuracy, the symptoms presented by my patient, referred to in Case XXXI, than the above quotations from a description of the symptoms produced in the healthy, by a large dose of the medicine which cured her.

Note to p. 36.

My patient has had two additional attacks of tetanic convulsions, since the text was sent to the printer; and she also now tells me, that she had had several former seizures of which I had not been informed. On May 4th, 1859, she had one nearly approaching in severity and duration to that which I have above described. There was, however, neither lock-jaw nor opisthotonos, and owing to the absence of the latter symptom, and the weight of the body resting on the right arm, which was contracted under it, her daughter (at her urgent request) made a violent effort to remove it, which produced a severe sprain, from which she has suffered more or less ever since. On this occasion she was relieved of the spasms by *Nux Vomica* alone, in a few hours.

Nothing had been taken which could have had the slightest relation to the attack, though she had been a good deal excited mentally, which I find was the case also prior to the one which I have above described.

Note to p. 41.

While the MS. of the text has been in the hands of the printer, I have had another striking exemplification of the power of an exceedingly small dose of medicine, to produce morbid symptoms on a patient predisposed to its action.

On May 2d, I was sent for in haste, to visit Mrs. L—, who, by her own prescription, had taken eight pilules of *Nux vomica* (3), for *dysmenorrhœa*. The immediate effect was entire suppression of the menses, followed by swelling of the abdomen and extremities, and stiffness of the muscles at the back of the neck, which continued for a day or two. The dose taken was a near approximation to what would be considered an "infinitesimal" one.

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